

# L17000660751

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : SANDRA CASTILLO TAX SERVICE LLC  
Account Number : I20190000047  
Phone : (321)946-6560  
Fax Number : (866)704-9120

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
DIAZ KINGSLEY ENTERPRISE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 MAY 16 PM 1:29

2022 MAY 16 AM 8:27

APPROVED  
AND  
FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DIAZ KINGSLEY ENTERPRISE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diaz, Luisa Amada

Name of Person

DIAZ KINGSLEY ENTERPRISE, LLC

Firm/Company

3611 CAPE CT.

Address

SAINT CLOUD, FL 34772

City/State and Zip Code

Ldiaz.enterprises@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Danis Ramos

407

205-0002

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

[illegible]**Filing Fee: \$25.00**