

06/7/2017 13:15 PM PDT

TO:18506176383 FROM:7862171243

Page: 1

Division of Corporations

<https://efile.sunbiz.org/scripts/efilcovr.exe>

L17000105602
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
(((H170001531863)))

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001531863)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : JP GLOBAL BUSINESS
Account Number : I20130000083
Phone : (305)436-0093
Fax Number : (305)436-0094

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

Email Address: master@jpgbusiness.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LDA INVESTMENTS LLC**

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

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Corporate Filing Menu

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6/7/17 2:51 PM

06/7/2017

13:15 PM PDT

TO:18506176383 FROM:7862171243

Page: 2

COVER LETTER

(((H170001531863)))

**TO: Registration Section
Division of Corporations**

SUBJECT: LDA INVESTMENTS 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:

SONIA BOTERO

Name of Person

JP GLOBAL BUSINESS SOLUTIONS INC

Firm/Company

1395 BRICKELL AVENUE, STE 1380

Address

MIAMI, FL 33131

City/State and Zip Code

MASTER@JPGBUSINESS.COM

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

For further information concerning this matter, please call:

SONIA BOTERO

at (305) 359-3700

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

17 JUN -7 AM 9:27

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

17 JUN -7 AM 9:27

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 7th, 2017

Rouze Jones
Signature of a member

Signature of a member or authorized representative of a member

Louise Ramos
Typed or printed name of signee

Typed or printed name of signer