

L17000137943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

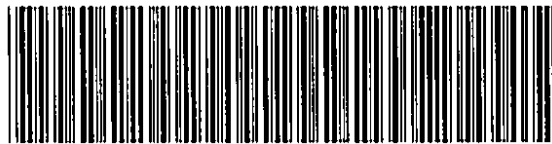
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SECRETARY OF STATE  
DIVISION OF CORPORATION  
18 SEP 13 PM 12:10

N COOPER

SEP 17 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INDIE MOOD, 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:

EDUARDO MENDOZA

Name of Person

THE ACCOUNTANT CLUB

Firm/Company

12700 SW 96 STREET

Address

MIAMI, FL 33186

City/State and Zip Code

THEACCN@AOL.COM

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

For further information concerning this matter, please call:

EDUARDO MENDOZA

Name of Person

305

at ( )

Area Code

389-0646

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

INDIR MOOD, LLC

Page 1 of 3

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>
MGR	SALIM BARAKE	1158 98TH ST, BAY HARBOR ISLAND FL 33154	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

18 SEP 13 PM 12:10

SECRETARY OF STATE  
DIVISION OF CORPORATION

E. Effective date, if other than the date of filing: 06/26/2017 (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 \_\_\_\_\_

\_\_\_\_\_  
Signature of a member or authorized representative of a member

**MARIA A CACERES GUTIERREZ**

\_\_\_\_\_  
Typed or printed name of signee