

L17000150052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400302700174

08/25/17--01009--004 \*\*25.00

FILED  
17 AUG 25 AM 11:01  
CLERK OF COURT  
JANIS L. GONDA

S. WARREN

AUG 29 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ESCALANTE MOTORS SB 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:

JAIME REYES

Name of Person

CBA MIAMI LLC

Firm/Company

11890 SW 8th STREET OFFICE 201

Address

MIAMI, FL 33184

City/State and Zip Code

CBAMIAMILLC@GMAIL.COM

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

For further information concerning this matter, please call:

JAIME REYES

Name of Person

at ( 786 )

Area Code

728 5603

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
AUG 25 4 21:01  
REGISTERED AGENT  
TAMPA  
FLORIDA

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	ASTOLFO PIVA MARIA PATRICIA	Urb. La Maroma Casa F-03. Calle Principal	<input type="checkbox"/> Add
		Santa Barbara de Zulia	<input type="checkbox"/> Remove
		Zulia, 5148 - Venezuela	<input checked="" 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
			<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


17 AUG 25 AM 11:01  
 FILED  
 U.S. DISTRICT COURT  
 SOUTHERN DISTRICT OF FLORIDA

[illegible]

**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.

Dated Agosto 08 *11/11* 2017

Agosto 08



Signature

Signature of a member or authorized representative of a member

MARIA PATRICIA ASTOLFO PIVA

Typed or printed name of signee

FILED  
17 AUG 25 AM 11:02  
FBI - NEW YORK