

L17000171171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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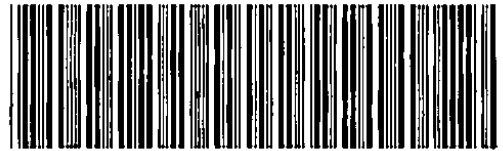
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CORPORATION ANDUJAR & AFANADOR, 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:

YNGRID ROCIO AFANADOR MANTILLA

Name of Person

CORPORACION ANDUJAR & AFANADOR, LLC

Firm/Company

525 SW 130TH AVE

Address

DAVIE, FLORIDA 33325

City/State and Zip Code

JIMENEZACCOUNTING@GMAIL.COM

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

For further information concerning this matter, please call:

YNGRID ROCIO AFANADOR MANTILLA

850

273-0758

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2015 SEP 17 PM 3:37

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of</u>
MGR	YNGRID ROCIO AFANADOR	525 SW 130TH AVE	<input type="checkbox"/> Ac
	MANTILLA	DAVIE, FLORIDA 33325	<input checked="" type="checkbox"/> Re
			<input type="checkbox"/> Ch
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

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 6

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li 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 ear

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

Dated AUGUST 21ST 2019

Signature of a member of the

Signature of a member or authorized representative of a member

YNGRID ROCIO AFANADOR MANTILLA

Typed or printed name of signee