

L17000212612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

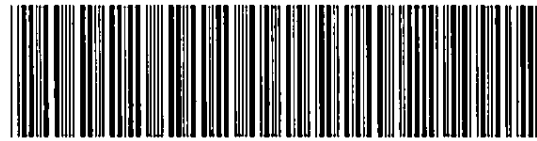
(Business Entity Name)

(Document Number)

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DEC 13 2017
J. HARRIS

2017 DEC 11 PM 4:45

2017 DEC 11 PM 12:10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NIETO L.L.C.
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:

Courtney Wernette
Name of Person
Inc Authority, Inc.
Firm/Company
5605 RIGGINS COURT, STE. 200
Address
RENO NV 89502
City/State and Zip Code
docs@incauthority.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Courtney Wernette at (800) 638-2320 ext. 2207
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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>
MGR	JESUS ALEJANDRO	5238 Emory Cir	<input type="checkbox"/> Add
		Jacksonville, FL 32207	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NIETO QUINTERO	5238 Emory Cir	<input type="checkbox"/> Add
		Jacksonville, FL 32207	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JESUS ALEJANDRO	5238 Emory Cir	<input checked="" type="checkbox"/> Add
	NIETO QUINTERO	Jacksonville, FL 32207	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JUAN CARLOS	5238 Emory Cir	<input checked="" type="checkbox"/> Add
	NIETO QUINTERO	Jacksonville, FL 32207	<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

- **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 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 11/29, 2017

J. Alejandro Nieto
Signature of a member or authorized representative of a member

JESUS ALEJANDRO NIETO QUINTERO
Typed or printed name of signee

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Filing Fee: \$25.00

217 DEC 11 PM 12:10