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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

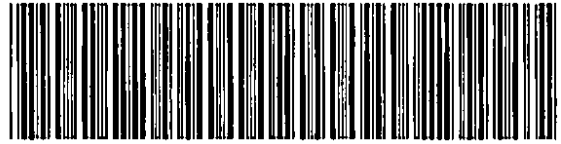
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 17 AM 10:56

N COOPER

AUG 23 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROAD ANTS 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:

NEYSA M MORALES

Name of Person

ROAD ANTS LLC

Firm/Company

7419 SW 152 AVE APT 102

Address

MIAMI FL 33193

City/State and Zip Code

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

For further information concerning this matter, please call:

NEYSA M MORALES

786 302 7613

Name of Person

at (_____) _____
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

ROAD ANTS 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>
AMBR	PIERRE KFOURY	15295 SW 106TH LN APT 702	<input checked="" type="checkbox"/> Add
		MIAMI FL 33196	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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E. Effective date, if other than the date of filing: _____ (optional)

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.

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

Dated AUGUST 14 / / 2018

X  Signature of a member or an authorized representative of the company

Signature of a member or authorized representative of a member

NEYSA M MORALES

Typed or printed name of signee