

18000032812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

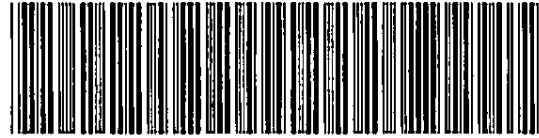
(Business Entity Name)

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DIVISION OF CORPORATIONS
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N COOPER

MAY 23 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AA EMMANUEL Construction LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luis M Acosta
Name of Person

AA EMMANUEL Construction LLC
Firm/Company

1505 MERIDIL AVE
Address

TAMPA FL 33612
City/State and Zip Code

LUISMANUELACOSTA83@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis M Acosta at (813) 863-0634
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 type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input 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

AA EMMANUEL CONSTRUCTION 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	JOAQUIN G HERNANDEZ	9105 SANDCROFT CT	<input checked="" type="checkbox"/> Add
		TAMPA FL 3315	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Dated May, 17 . 2018

Signature of a man

Signature of a member or authorized representative of a member

Luis M Acosta

Typed or printed name of signee