

U8000 127 405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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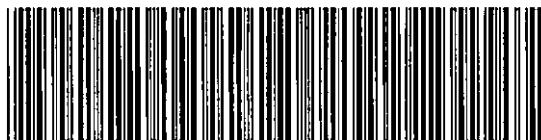
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MELIPER, 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:

Manuel A. Ramirez, Esq.

Name of Person

Castro & Ramirez, LLC

Firm/Company

1805 Ponce de Leon Blvd, Suite 500

Address

Coral Gables, Florida 33134

City/State and Zip Code

mramirez@castroramirez.com

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

For further information concerning this matter, please call:

Manuel A. Ramirez, Esq

305 372-2800
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

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	ANTONIO PEREZ	1850 South Ocean Drive #2903	<input type="checkbox"/> Add
		Hallandale, FL 33009	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MIREYA PEREZ	1850 South Ocean Drive #2903	<input type="checkbox"/> Add
		Hallandale, FL 33009	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

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SECURARY OF STATE
FALL AIRCRAFT FLORIDA
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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA
69

(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)

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

12/17/15

~~Signature of a member or authorized representative of a member~~

MANUEL A. RAMIREZ, ESQ

Typed or printed name of signee