

L18000 138147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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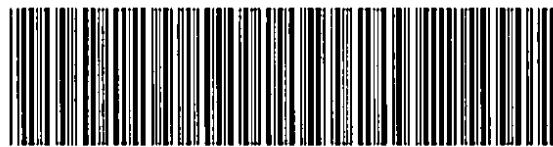
(Business Entity Name)

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DIVISION OF CORPORATION
10 JUN 25 AM 10:57

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JUN 27 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: P & IDEA USA,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:

NEUZA CESAR

Name of Person

ATPLUS OF MIAMI INC

Firm/Company

8180NW 36 ST SUITE 407

Address

DORAL,FL,33166

City/State and Zip Code

NEUZACESAR@YAHOO.COM

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

For further information concerning this matter, please call:

NEUZA

786 4202909
at ()
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

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>
MGRM	PAULO CASSEB	1950 NW 93TH AVE	<input type="checkbox"/> Add
		MIAMI,FL,33172	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Francisco J Coya Parraga	1950 NW 93TH AVE	<input checked="" type="checkbox"/> Add
		MIAMI,FL,33172	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
S	PAULO CASSEB	1950 NW 93TH AVE	<input checked="" type="checkbox"/> Add
		MIAMI,FL,33172	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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DIVISION OF INFORMATION

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.

Dated JUNE, 20 2018

Paul G. D.

Signature of a member or authorized representative of a member

PAULO CASSEB MGRM

Typed or printed name of signee