

118000125466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

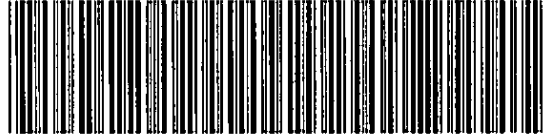
(Business Entity Name)

(Document Number)

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12/03/18--01023--028 **25.00

12/11/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANDO DORAL 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:

JOSE FRANCISCO SANDOVAL GALAVIS

Name of Person

SANDO DORAL LLC

Firm/Company

8814 GRAND PALMS CIR

Address

KISSIMMEE, FL 34747

City/State and Zip Code

taxspecialistusa@gmail.com

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

For further information concerning this matter, please call:

JOSE MANUEL GUERRERO at (786) 838-8293
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

SANDO DORAL, LLC

The Articles of Organization for this Limited Liability Company were filed on 08/02/2018 and assigned Florida document number 118000185466.

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	SANZ GONZALEZ, GABRIEL I	8814 GRAND PALM CIR KISSEEMMEE, FL 34747	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(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)

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

Dated NOVEMBER 27 2018

Signature of a member or authorized representative of a member

JOSE FRANCISCO SANDOVAL GALAVIS

Typed or printed name of signee