

L18000186603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

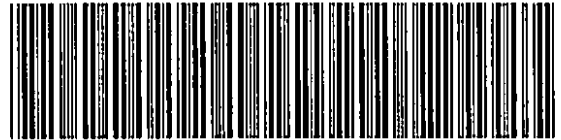
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/10/18--01023--018 **136.75

Amend

FILED
SEP 10 2018
CLERK OF STATE
OFFICE OF THE CLERK OF STATE
1000 PENNSYLVANIA AVENUE
HARRISBURG, PA 17103

SEP 07 2018

D CUSHING

LLC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Montesi I LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Karolina Torres
Name of Person
KTorres Services Corp
Firm/Company
600 S Federal Hwy Ste 207
Address
Deerfield Beach, FL 33441
City/State and Zip Code
Ktorres @ ktorresservices.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karolina Torres at 561, 562-0814
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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL
JAN 12 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2018

KAROLINA TORRES
KTORRES SERVICES CORP
600 S FEDERAL HWY, STE 207
DEERFIELD BEACH, FL 33441

SUBJECT: MONTESI I LLC
Ref. Number: L18000186603

We have received your document for MONTESI I LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$30.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 318A00017424

1990

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Mailing address MAY BE A POST OFFICE BOX)

_____, Florida _____
City Zip Code

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	Patricia Montesi Pereira	2592 Carambola Cir N	<input checked="" type="checkbox"/> Add
		Coconut Creek, FL 33066	<input type="checkbox"/> Remove

_____ ☐ Change

AMBR	Fernanda Montesi Pereira	2592 Carambola Cir N	<input checked="" type="checkbox"/> Add
		Coconut Creek, FL 33066	<input type="checkbox"/> Remove

_____ ☐ Change

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[illegible]

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 August 14th 2018

Diva Montesi da Silva
Signature of a member or authorized representative of a member

Diva Montesi da silva
Typed or printed name of signee