

11/27/2018 7:08 PM FAX

11/27/2018

0001/0005

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000337781 3)))



H180003377813ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HADAS ACCOUNTING AND TAX SERVICES

Account Number : 120170000018

Phone : (305)222-2289

Fax Number : (305)221-3810

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FILED  
2018 NOV 28 AM 9:24  
CLERK OF STATE  
OF FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
TECHNOMEDICAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

T. CLINE  
NOV 29 2018  
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

L18000204122

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TECHNOMEDICAL 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:

HENRY COSTA

Name of Person

HADAS ACCOUNTING & TAX SERVICES INC

Firm/Company

210 SW 107TH AVE

Address

MIAMI FL 33174

City/State and Zip Code

HADASTAXESERVICES@GMAIL.COM

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

For further information concerning this matter, please call:

HENRY COSTA

305

222-2289

at (

Area Code

Daytime Telephone Number

Name of Person

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

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2018 NOV 28 AM 9:24

FILED



L 1 00000204122

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	CORONADO, JOSE O	9739 NW 10TH TERRA MIAMI, FL 33172	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	OSWALDO J CORONADO DAVILA	9739 NW 10TH TERRA MIAMI, FL 33172	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PAZ, YANNI	9739 NW 10TH TERR MIAMI, FL 33172	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	YANNI C PAZ SERRANO	9739 NW 10TH TERR MIAMI, FL 33172	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

918 NOV 28 AM 9:24  
 RECEIVED  
 MIAMI  
 FLORIDA

FILED

L18000204122

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

2018 NOV 28 AM 9:24  
U.S. DEPT. OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C. 20535

10

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**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.

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 NOVEMBER 27

2018

Signature of a member or authorized representative of \_\_\_\_\_

YANNI C PAZ SERRANO

Typed or printed name of signee