

L190000 61779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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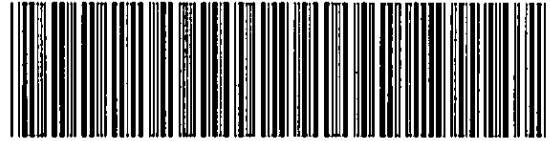
(Business Entity Name)

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2019.11.19

Amend

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BOSA PARTNERS 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:

JAMES BAKER

Name of Person

MATA & BAKER TAX CONSULTANTS

Firm/Company

80 SW 8TH STREET STE 3303

Address

MIAMI, FL 33130

City/State and Zip Code

jim@mbtaxconsultants.com

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

For further information concerning this matter, please call:

JAMES BAKER

+1 (888) 250-8960

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

منہ

(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."

MIAMI, FL 33137

MIAMI, FL 33137

Zip Code

Page 1 of 3

MGR = Manager
AMBR = Authorized Member

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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 September 27 2019

VICTOR BARBOSA

Typed or printed name of signee