

L190000 72698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

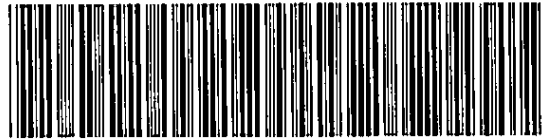
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T GLASS

MAY 06 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2019

NADIA PAZOS
800 DOUGLAS RD
SUITE 830
MIAMI, FL 33134

SUBJECT: DIGITAL SPV, LLC
Ref. Number: L19000072698

We have received your document for DIGITAL SPV, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 819A00007337

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Digital SPV, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Nadia Pazos
Name of Person
Pazos Law Group, P.A.
Firm/Company
800 Douglas Rd, Suite 830
Address
Miami, FL 33134
City/State and Zip Code
nadia@pazoslawgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nadia Pazos at 954 449-8719
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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

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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	Nadia Pazos	800 Douglas Road	<input type="checkbox"/> Add
		Miami, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mario Pazos	800 Douglas Road	<input checked="" type="checkbox"/> Add
		Miami, FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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.

Dated 5/1/19
[Signature]
 Signature of a member or authorized representative of a member
[Signature] Nadia Paros
 Typed or printed name of signee