

L19000116700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

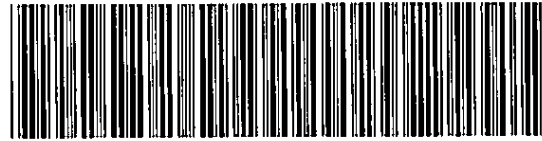
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AND
FILED
2019 JUN 10 PM 5:01
COURT CLERK
CLERK OF COURT

T GLASS

JUN 24 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LEONARDO RIERA 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:

RIERA, LEONARDO

Name of Person

LEONARDO RIERA LLC

Firm/Company

1552 NE 8TH ST # 205

Address

HOMESTEAD, FL 33033

City/State and Zip Code

CANDAEXPENSES@GMAIL.COM

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

APPROVED
AND
FILED
2019 JUN 10 PM 5:01
TALLAHASSEE, FL

For further information concerning this matter, please call:

ANTONIO COA

561 8144558
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

LEONARDO RIERA LLC

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	MARIA VALE	1552 NE 8TH ST # 205	<input checked="" type="checkbox"/> Add
		HOMESTEAD, FL 33033	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANTONIO COA	1552 NE 8TH ST # 205	<input type="checkbox"/> Add
		HOMESTEAD, FL 33033	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 2019 JUN 18 PM 3:01
 CLERK OF DISTRICT COURT
 1000 N. W. 13th Ave., 10th Floor
 Miami, FL 33136

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

2019 JUN 10 PM 5:01
OFFICE OF THE CLERK
STATE OF MASSACHUSETTS

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AND
FILED

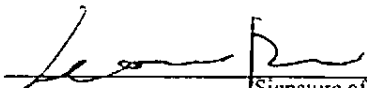
E. Effective date, if other than the date of filing: _____ (optional)

(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 MAY 31, 2019



Signature of a member or authorized representative of a member

LEONARDO RIERA

Typed or printed name of signee