

L19000120465
~~W19000038722~~

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

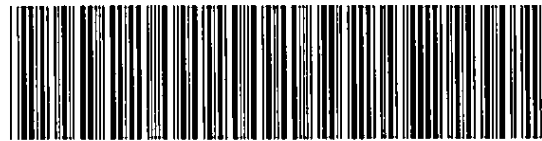
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/20/19--01041--002 **25.00

S TALLENT

JUN 06 2019

2019 MAY 20 PM 2:04
SECRETARY OF STATE
TALLA HASSE, FL

FILED

Handwritten signature

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Leah and Nenes Accounting Services 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:

Leyanis Valdes Alonso

Name of Person

Leah and Nenes Accounting Services LLC

Firm/Company

427 Donald St

Address

Lakeland FL 33813

City/State and Zip Code

leyanisiv02@gmail.com

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

For further information concerning this matter, please call:

Leyanis Valdes Alonso

863

873-1843

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

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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	Leyanis Valdes Alonso	427 Donald St Lakeland FL 33813	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Maria C. Alonso Fernandez	427 Donald St Lakeland FL 33813	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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05/17/2019

(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)

(b) The 90th day after the record is filed.

Dated May 17 2019

Flons

Signature of a member or authorized representative of a member

Leyanis Valdes Alonso

Typed or printed name of signee