

L19000166059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

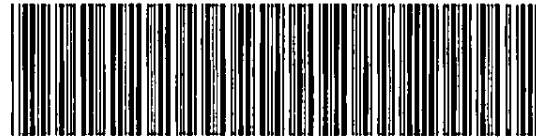
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS
JAN 29 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: _____
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:

Francisco A Verdecia

Name of Person

LoboVerde LLC

Firm/Company

3720 SW 60th Court

Address

Miami, Florida 33155

City/State and Zip Code

loboverde1243@gmail.com

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

For further information concerning this matter, please call:

Francisco A Verdecia

786

473-1819

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

LOBOVERDE LLC

If Changing Registered Agent, Signature of New Registered Agent

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>
AR	Ivan Lopez-Bosch	8500 SW 112TH STREET	<input type="checkbox"/> Add
		MIAMI, FL 33156	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Maria I Fernandez	3720 SW 60th Court	<input checked="" type="checkbox"/> Add
		Miami, FL 33155	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Ownership percentage of LLC will be changing

AR Francisco Verdecia has 90% Ownership

AR Maria I. Fernandez has 10% Ownership

AR Ivan Lopez-Bosch has 0% Ownership and was removed from the LLC

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10/01/2019

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 12/23/19



Signature of a member or authorized representative of a member

Francisco A Verdecia

Typed or printed name of signee