

L19000174733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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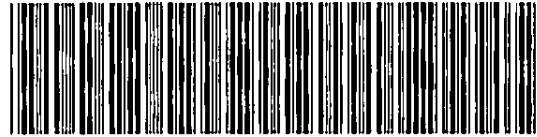
(Business Entity Name)

(Document Number)

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JUL 16 2020

AUG 27 2020  
S. YOUNG

2020 JUL 16 PM 6:16

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BLACK HORSE P&C INSURANCE 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:

NITSUGA SANCHEZ  
Name of Person  
BLACK HORSE P&C INSURANCE  
Firm/Company  
110 FONTAINEBLEAU BLVD UNIT 311  
Address  
MIAMI FL 33172  
City/State and Zip Code  
NITSUSANCHEZ@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NITSUGA SANCHEZ 786 4577846  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Florida document number L19000174733

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**(Mailing address MAY BE A POST OFFICE BOX)**

Zip Code

**If Changing Registered Agent, Signature of New Registered Agent**



[illegible]

(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)

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.

NE 24 \_\_\_\_\_ 2020 \_\_\_\_\_

Signature of a member or authorized representative of a member

NITSUGA SANCHEZ

Typed or printed name of signee

**Filing Fee: \$25.00**