

L19000242849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

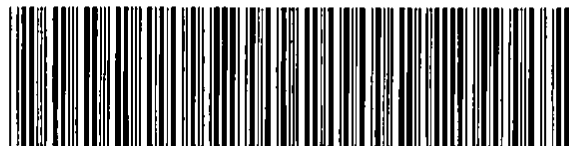
(Business Entity Name)

(Document Number)

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A stylized, handwritten signature in black ink, consisting of several loops and a long horizontal stroke.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MERIDIANA MFO, 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:

Josephin Reyes

Name of Person

GUILLLEN PUJOL CPA PA

Firm/Company

6161 Waterford District Dr. Suite 475

Address

Miami, FL 33126

City/State and Zip Code

jreyes@guillenpujol.com

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

For further information concerning this matter, please call:

NESTOR GUILLLEN

305

831-4093

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

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 add 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	MARTINEZ U., JUAN F	2600 S. Douglas Rd.	<input type="checkbox"/> Add
		Suite 908.	<input checked="" type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
AMBR	CASTLE HILL CAP. LTD.	2600 S. Douglas Rd.	<input type="checkbox"/> Add
		Suite 908.	<input checked="" type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
AMBR	ZAFIRE INVESTMENTS LTD.	2600 S. Douglas Rd.	<input checked="" type="checkbox"/> Add
		Suite 908.	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
AMBR	RODBECK HOLDINGS S.A.	2600 S. Douglas Rd.	<input checked="" type="checkbox"/> Add
		Suite 908.	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
AMBR	MARMER SAS.	2600 S. Douglas Rd.	<input checked="" type="checkbox"/> Add
		Suite 908	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
AMBR	ANDREA MERCHAN	2600 S. Douglas Rd.	<input checked="" type="checkbox"/> Add
		Suite 908	<input type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 April 4 2024

at 12:01 a.m. on the earlier of: (b) The four day

Levin

RESTOR L. Guip/en

Typed or printed name of signee