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2020 NOV -2 PM 2:08

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12/12/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAS VALOR 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:

LARA, FEDERICO
Name of Person

MASVALOR, LLC
Firm/Company

3641 OAKS CLUBHOUSE DR #106
Address

POMPAHO BEACH, FL 33069
City/State and Zip Code

A.MELAMED@ADVANTAXABOGADOS.COM
E-mail address: (to be used for future annual report notification)

2011 NOV -2 PM 2:06

For further information concerning this matter, please call:

ANA MALAVE at (754) 246 1235
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

MASVALOR LLC

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2025 NOV -2 PM 2:00

2:2:2 PM 2:00

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 (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 10/20, 2020.

ANABELLA MELAMED

Typed or printed name of signee