

L20 0000 14896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

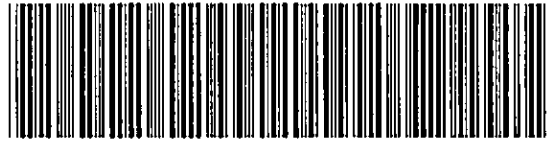
(Business Entity Name)

(Document Number)

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*Amend/cus*

MAY 19 2020  
I ALBRITTON

# COVER LETTER

TO: Registration Section  
Division of Corporations

INVERSIONES LAS CONDES LLC

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:

DARIO RODRIGO MADRIGAL NORIEGA

\_\_\_\_\_  
Name of Person

INVERSIONES LAS CONDES LLC

\_\_\_\_\_  
Firm/Company

690 LINCOLN ROAD #300

\_\_\_\_\_  
Address

MIAMI BEACH, FL 33139

\_\_\_\_\_  
City/State and Zip Code

LcSmallBusinessServices@Gmail.com

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

For further information concerning this matter, please call:

Ligia Espinosa

407 797-8076

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 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>
AMBR	TORRE, AURELIO, SR	690 LINCOLN ROAD #300	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JAVIERA CORDOVA BESOAIN	690 LINCOLN ROAD #300	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	INES VICTORIA VERA C.	690 LINCOLN ROAD #300	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JORGE ERNESTO UGARTE G	690 LINCOLN ROAD #300	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JOSE LUIS VEGA CONTRERAS	690 LINCOLN ROAD #300	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALEJANDRA M. CORDOVA	690 LINCOLN ROAD #300	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

AMBR - ADD

SEBASTIAN FELIPE CORDOVA BESOAIN

690 LINCOLN ROAD #300

MIAMI BEACH, FL 33139

AMBR - ADD

MARIA ELENA CORDOVA B

690 LINCOLN ROAD #300

MIAMI BEACH, FL 33139

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 March 20th, 2020

Signature of a member or authorized representative of a member

DARIO RODRIGO MADRIGAL NOGUERA

Typed or printed name of signee