

L20 0000095725

(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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04/20/20--01014--030 **25.00

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2020 APR 20 PM 2:19
CLERK OF COURT

Amend
Name
Chg

APR 30 2020

ALBRITTON

COVER LETTER

TO: **Registration Section**
Division of Corporations

HOLA TV & NETWORK 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:

VALERY N ESCRICH

Name of Person

Firm/Company

3759 GRANDEWOOD BLVD #317

Address

ORLANDO, FL 32837

City/State and Zip Code

NSYTV20017@GMAIL.COM

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

For further information concerning this matter, please call:

VALERY N ESCRICH

407 8449140

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 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>
MGR	VALERY N ESCRICH	3759 GRANDEWOOD BLVD #317	<input checked="" type="checkbox"/> Add
		ORLANDO,FL 32837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DALIA G CHACON ESCRICH	3759 GRANDEWOOD BLVD #317	<input type="checkbox"/> Add
		ORLANDO,FL 32837	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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.

(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 match the date of filing, the date of filing must be inserted in the space provided below.

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.

Signature of a member or authorized representative of a member

Valery Escrich
Typed or printed name of signee

Filing Fee: \$25.00