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(Requestor's Name)

(Address)

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☐ PICK-UP☐ WAIT☐ MAIL

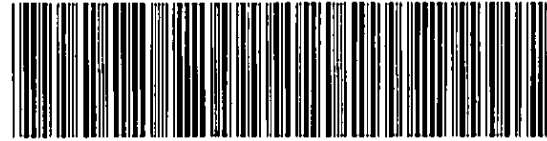
(Business Entity Name)

(Document Number)

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10/11/2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** KMTG - PRISMA INVESTMENT, 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:

Jesus Bermudez

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

Tax Care Orlando

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

2701 S John Young Pkwy, Suite 216

\_\_\_\_\_  
Address

Orlando, FL, 33178

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

jesus.bermudez@taxcareinc.com

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

For further information concerning this matter, please call:

Jesus Bermudez

407 250-4879  
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>
AMBR	Pedreros Ampuero, Jaime	13375 GORGONA ISLE DR	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Libano de la Fuente, Matias I	13375 GORGONA ISLE DR	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Ackermann Escobar, Pablo	13375 GORGONA ISLE DR	<input type="checkbox"/> Add
		WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Santiago, Johnathan A.	12759 SW 88 St. Miami, FL. 33186	<input checked="" type="checkbox"/> Add
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[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) **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 September. 21

2021

Signature of a member or authorized representative of a member

Agus Bermudez

Typed or printed name of signee