

121 000 349754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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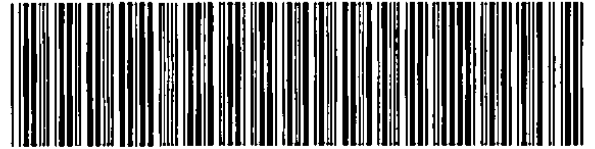
(Business Entity Name)

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUNSET EMPIRE PROPERTIES 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:

RAY DOMINGUEZ, E.A.

Name of Person

SMAART LLC

Firm/Company

8200 W 33RD AVE, STE #8

Address

HIALEAH, FLORIDA 33018

City/State and Zip Code

RAY@SMAARTBIZ.COM

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

For further information concerning this matter, please call:

RAY DOMINGUEZ, E.A.

305 764 - 6179

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

[illegible]

[illegible]

F. Effective date, if other than the date of filing: _____ (optional)

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.

2021

Dated _____, _____

Radcliff

RAY DOMINGUEZ, E.A. (Authorized Representative)

Filing Fee: \$25.00