

LL2000 268350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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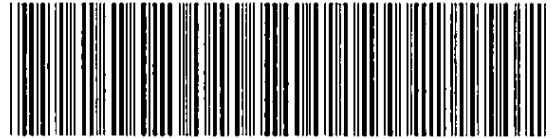
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: C & K LEGACY LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN GUERRERO

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

GUERRERO LAW GROUP PLLC

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

6600 COW PEN RD SUITE 260

\_\_\_\_\_  
Address

MIAMI LAKES FL 33014

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

SGUERRERO@THEGUERREROLAW.COM

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

For further information concerning this matter, please call:

STEPHEN GUERRERO

305 4886250  
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	IN THE ESTATE OF ALVAREZ	6805 OLD CHENEY HWY	<input type="checkbox"/> Add
		ORLANDO FL 32807	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	THE ALVAREZ FAMILY	6805 OLD CHENEY HWY	<input checked="" type="checkbox"/> Add
	LIVING TRUST	ORLANDO FL 32807	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**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 AUGUST 26TH 2024

Typed or printed name of signee

**Filing Fee: \$25.00**