L22000483581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

000428382190

04/23/24--01032--016 **25.00

5/6/24
RW

FILED
2024 APR 23 PM 5:05

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: AMT SERVICIOS ESPECILIZADOS 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:

ORIEL MONTERO
Name of Person

MONTERO CPA TAX & ACCOUNTING
Firm/Company

2574 N UNIVERSITY DR SUITE 206
Address

SUNRISE FLORIDA 33322
City/State and Zip Code

omontero@monterocpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ORIEL MONTERO at (954) 683-2628
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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	**<u>Name</u>**	**<u>Address</u>**	**<u>Type of Action</u>**
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change
______	____________________	______________________________	☐Add
		______________________________	☐Remove
		______________________________	☐Change