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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

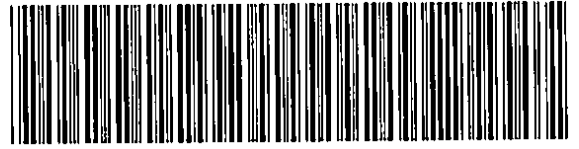
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/15/00--01004--032 **25.00

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ~~PHENIX DESIGN FEEC~~ Leon Service And Repair, 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:

ELYSABET MONTANEZ

Name of Person

TAXCENTER USA LLC

Firm/Company

7336 W 20TH AVENUE

Address

HALEAH, FL 33016

City/State and Zip Code

TAXCENTERUSA@LIVE.COM

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

For further information concerning this matter, please call:

ELYSABET MONTANEZ

at (305) 825-2500

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member


Title	Name	Address	Type of Action
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(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)

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.

2023



Signature of a member or authorized representative

MARTIN VENEREO

Filing Fee: \$25.00