

LB 000 104267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

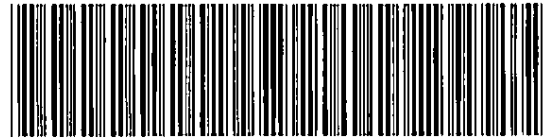
(Business Entity Name)

(Document Number)

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2023 MAR 27 PM 3:04

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BEST SCREEN 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:

Maria A Tejada

Name of Person

BEST SCREEN REPAIR

Firm/Company

19367 NW 23RD ST

Address

Pembroke Pines FL 33029

City/State and Zip Code

tejadaalejandra54@gmail.com

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

For further information concerning this matter, please call:

Maria A Tejada

754

280-2427

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee

2023 MAR 27 PM 3:02

BEST SCREEN REPAIR, LLC

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2021/11/27 PM 3:02

2021-11-27 PM 3:02

Effective date, if other than the date of filing: \_\_\_\_\_ (Optional)  
(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.

Dated 3/24/2023.

Maria A. Tejeda  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Maria A Tejada

Typed or printed name of signee

**Filing Fee: \$25.00**