

L23000375102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

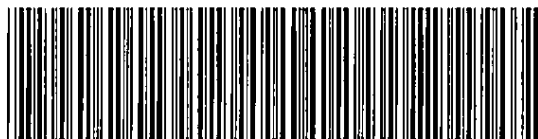
(Business Entity Name)

(Document Number)

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2023 AUG 21 PM 12:40
CLERK OF STATE
DIVISION OF CORPORATIONS

08/21/23
CLERK OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ULADAMAS

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:

IXCHEL HERNANDEZ

Name of Person

ULADAMAS

Firm/Company

10364 SW 212TH ST APT 105

Address

CUTLER BAY FL, 33189

City/State and Zip Code

uladamastore@gmail.com

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

For further information concerning this matter, please call:

MARIAM RODRIGUEZ

at (786)

444-8664

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

2023 AUG 21 PM 12:40

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

ULADAMAS

The Articles of Organization for this Limited Liability Company were filed on AUGUST 9, 2023 and assigned
Florida document number L23000375102.

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>
MGR	IXCHEL HERNANDEZ	10364 SW 212TH ST Apt 105 Cutler Bay, FL. 33189	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2023 JUN 21 PM 1:40
SECRETARY OF STATE
DIVISION OF CORPORATIONS

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2023 AUG 21 PM 12:40
DEPARTMENT OF STATE
DIVISION OF CORPORATION

E. 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)
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.

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 AUGUST, 16

2023

Signature of a member or authorized representative of a member

IXCHEL HERNANDEZ

Typed or printed name of signee

Filing Fee: \$25.00