

L24000061701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2024 OCT 28 PM 3:45
OFFICE OF THE
TALLAHASSEE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MELLO SOLUTIONS 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:

ANTONIO DE MASE

Name of Person

MELLO SOLUTIONS LLC

Firm/Company

1168 BATTERSEA AVE

Address

SPRING HILL, FL 34609

City/State and Zip Code

ANTONIODEMASE96@GMAIL.COM

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

For further information concerning this matter, please call:

ANTONIO DE MASE

at (352) 777-6879

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

2024 OCT 28 PM 3:45
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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	ANTONIO DE MASE		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		7901 4th St N #23159 St. Petersburg, FL 33702	<input checked="" type="checkbox"/> Change
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2020 OCT 20 PM 1:45
SECRETARY OF THE
TALLAHASSEE COUNTY
COMMISSION

2007 OCT 28
SECRET
TAM

(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.

Dated 22nd of October 2024


Signature of a member or author

Signature of a member or authorized representative of a member

ANTONIO DE MASE

Typed or printed name of signer

Filing Fee: \$25.00