

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ELCHONA RCD, 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:

IGNACIO QUINTANA COBAS

Name of Person

Firm/Company

30 SW 1ST STREET

Address

MIAMI, FL 33130

City/State and Zip Code

dtilitzky@outlook.com

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

For further information concerning this matter, please call:

Daniela Tilitzky

at (305) 546-6795

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, 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	IGNACIO QUINTANA TOBAS	30 SW 1ST STREET	<input type="checkbox"/> Add
		MIAMI FL 33130	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IGNACIO QUINTANA COBAS	30 SW 1ST STREET	<input checked="" type="checkbox"/> Add
		MIAMI FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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