

L24000099374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

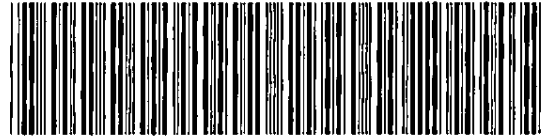
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400426530854

04/01/24--01004--013 **25.00

4/10/24
Rudite

FILED
2024 APR -1 PM 4:05
STATE
OF ALABAMA
CLERK OF COURT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TEMPCREW HOSPITALITY 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:

MARCIO AUGUSTO CALBO GARCIA FILHO

Name of Person

CALBO GARCIA HOLDINGS LLC

Firm/Company

14020 BISCAYNE BLVD #802

Address

NORTH MIAMI, FL 33181

City/State and Zip Code

CALBOGARCIA@HOTMAIL.COM

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

For further information concerning this matter, please call:

MARCIO AUGUSTO CALBO GARCIA FILHO

305 9271395
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
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>
AMBR	Jose Diego Atoche Neyra	482 NW 207TH ST, UNIT #9-310	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33169	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alberto Jose Mascagnini Briceno	129 NW 9 TH AV	<input type="checkbox"/> Add
		MIAMI FLORIDA, FL 33128	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change