

L2400011150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

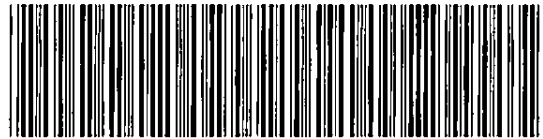
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2004 Nov 11 17:10:21

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Malai 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:

Frank Garcia III
Name of Person
Prosper Investments and Insurance Solutions LLC
Firm/Company
2401 S.Ocean Dr. suite 507
Address
Hollywood, FL 33019
City/State and Zip Code
fg3prosper@gmail.com
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Garcia III 954 683-0157
Name of Person at (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 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	MARÃ-LIA NUNES NOGUEIRA	4832 LULLABY LN -KISSIMMEE, FL 34746	<input type="checkbox"/> Add
		MARÃ-LIA NUNES NOGUEIRA	<input checked="" type="checkbox"/> Remove
		MARILIA NUNES NOGUEIRA	<input checked="" type="checkbox"/> Change
AMBR	IEDDA M NUNES NOGUEIRA R	4832 LULLABY LN -KISSIMMEE, FL 34746	<input type="checkbox"/> Add
		IEDDA M NUNES NOGUEIRA RAMOS	<input checked="" type="checkbox"/> Remove
		IEDDA F. NUNES NOGUEIRA RAMOS	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

[illegible]

(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.

2024

Frank Garcia III

Typed or printed name of signee

Filing Fee: \$25.00