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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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J. HORNE
JUL 28 2024

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2024 JUL 22 10:09 AM

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3009 NMA 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:

Kevin Correa

Name of Person

KEVIN CORREA PA

Firm/Company

1805 Ponce De Leon Boulevard Suite 300

Address

Coral Gables, Florida 33134

City/State and Zip Code

kevin@ketitleagency.com

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

For further information concerning this matter, please call:

Kevin Correa

305

429-6984

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

2023-05-22 10:14

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>
AP	KEVIN CORREA PA	805 PONCE DE LEON BOULEVARD SUITE 300 CORAL GABLES, FL 33134	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID'S CORPORATION AND/VS CORPORATION	DE SKINS WATERBURY ST FL 47 SUITE 490 MAIN STREET CORAL GABLES FL 33134	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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.

LY 16 _____ 2024 _____

Signature of a member or authorized representative of a member

Kevin Corrao, Esq.

Typed or printed name of signer

Filing Fee: \$25.00