

L24000348428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

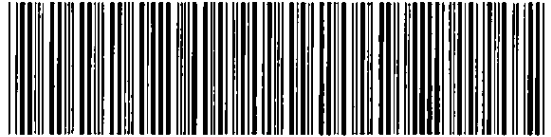
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10/24/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rene Perez BJJ
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:

Rene A Perez
Name of Person

Rene Perez BJJ
Firm/Company

273 Woodland Rd Palm Springs, FL
Address

Palm Springs, FL 33414
City/State and Zip Code

alexhippybjj@icloud.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Rene A Perez at (754) 260-4250
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