

M12000000170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

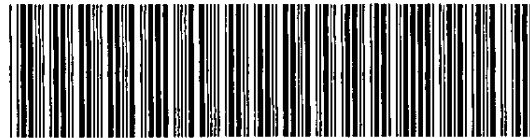
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

AUG 20 2012

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAMMA LUCIA Pizza & Pasta, LLC.  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aquiles Solano Jr  
Name of Person

The Solano Group P.A.  
Firm/Company

782 NW 42nd Ave Ste 328  
Address

Miami FL 33128  
City/State and Zip Code

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

For further information concerning this matter, please call:

Aquiles Solano at (305) 525-9962  
Name of Person Area Code and Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

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**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MAMMA LUCIA PIZZA & PASTA LLC.
2. This entity was formed under the laws of: Missouri
3. This entity was authorized to transact business in Florida on 01-10-2012 and its Florida document/registration number is M12000000170
4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGRM

Disantillo, Michele R.  
246 NE Point Circle  
Lee's Summit, MO 64064

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TALLAHASSEE, FLORIDA

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Required Signature: \_\_\_\_\_

Michele Disantillo  
Signature of Manager, Managing Member or Member

Filing Fee: \$25