P22000034268

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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2025 AUG -8 AH 8: 03

0.00



June 23, 2025

CLAUDIA LLANES CORP ZOMMA GROUP 355 ALHAMBRA CIRCLE, SUITE 1100 CORAL GABLES, FL 33134 US

SUBJECT: CLAUDIA LLANES CORP

Ref. Number: P22000034268

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$0.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Not sure what you are trying to do, the form you have is to convert out of the State of Florida. You also have a different suffix "P.A." and you have your entity listed an LLC. If you are trying to convert from a Profit Corporation to an LLC you can use the form included and include the added fees to convert.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Mary C Malone Amendment Section

Letter Number: 025A00013605

Received Back 7-22-25



July 29, 2025

CLAUDIA LLANES CORP LUCA CANCELLIERI, CPA 355 ALHAMBRA CIRCLE, SUITE 1100 CORAL GABLES, FL 33134 US

SUBJECT: CLAUDIA LLANES CORP

Ref. Number: P22000034268

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$0.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

One of the boxes needs to be checked off on how the admendment was adopted on the last page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 325A00016645

Mary C Malone Amendment Section

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: Claudia Llane	s Corp.				
	NUMBER: P22000034268	<u> </u>				
	rticles of Amendment and fee a	re submitted for filing.				
Please return al	correspondence concerning this	s matter to the following:				
	Luca Cancellieri, CPA					
		Name of Contact Person	n			
	Zomma Group, LLC					
		Firm/ Company				
	355 Alhambra Circle, Su	nite 1100				
		Address				
	Coral Gable, Florida 331	34				
		City/ State and Zip Cod	e			
	luca.cancellieri@zomma	group.com				
		be used for future annual report	notification)			
For further info	rmation concerning this matter.		444-8288			
	Name of Contact Person	at (305	de & Daytime Telephone Number			
	name of Comact Person					
S35 Filing	Fee S43.75 Filing Fee Certificate of Stati	~	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314		Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

2025 AUG -8 AH 8: 03

Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation (if known) provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to accreporation: g name, enter the new name of the corporation: , P.A. The new istinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." " or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word professional association," or the abbreviation "P.A. Principal office address, if applicable: the address MUST BE A STREET ADDRESS) MIA The new interpretation "Corp," N/A N/A The new interpretation "Corp," N/A W/A The new interpretation "Corp," The new interpretation "Corp," N/A W/A The new interpretation "Corp," W/A W/A The new interpretation "Corp," W/A The	Claudia Llanes, Corp.	_	±.,		
(Document Number of Corporation (if known) provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to incorporation: g name, enter the new name of the corporation: , P.A. The new istinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word professional association, or the abbreviation "P.A. Principal office address, if applicable: to address MUST BE A STREET ADDRESS) Imailing address. If applicable: In the registered agent and/or registered office address in Florida, enter the name of the ored agent and/or the new registered office address: N/A (Florida street address) (Florida street address) Florida	(Name of Corporation as curr	rently filed with the Florid	la Dept. of State)		
provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to incorporation: g name, enter the new name of the corporation: , P.A. The new instinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." " or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word professional association," or the abbreviation "P.A. Principal office address, if applicable: the address MUST BE A STREET ADDRESS (address MUST BE A STREET ADDRESS) The new instinguishable and contain the word corporation, " "company," or "incorporated" or the abbreviation "Corp." N/A Principal office address, if applicable: The new instinguishable and contain the word corporation name must contain the word professional association, " or the abbreviation "P.A." N/A The new instinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." N/A The new institute abbreviation "Corp." N/A	P22000034268				
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mailing address. if applicable: MA	A. If amending name, enter the new name of the corporation	<u>n:</u>			
" or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word professional association, " or the abbreviation "P.A." Principal office address, if applicable: Per address MUST BE A STREET ADDRESS Milling address, if applicable: Milling address, if applicable: Milling address, if applicable: Milling address MAY BE A POST OFFICE BOX Registered agent and/or registered office address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida, enter the name of the pred agent and/or the new registered office address: Milling address in Florida in the word	Claudia Llanes, P.A.			The ne	tı.
mailing address. if applicable: mailing address. if applicable: M/A Mailing address. if applicable: M/A May BE A POST OFFICE BOX) Registered agent and/or registered office address in Florida, enter the name of the pred ngent and/or the new registered office address: M/A (Florida street address) M/A (Florida street address)	name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "F	". A professional corpore	rated" or the abbreviation name must contain	n "Corp., n the wor	d
g the registered agent and/or registered office address in Florida, enter the name of the cred agent and/or the new registered office address: N/A	B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A			
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(Florida street address) egistered Office Address:, Florida	Name of New Registered Agent				
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egistered Office Address: Florida	(Floria	da street address)		-	
CQ1010 CO Office 1100 Coo.		·	rtd.		
	New Registered Office Address:	(Citv)	,	Code)	
		<u></u>	,	- Code)	
	New Registered Agent's Signature, if changing Registered Agent. I am family in the I appointment as registered agent. I am family	<u>gent:</u> liar with and accept the obl	igations of the position.		
d Agent's Signature, if changing Registered Agent: the appointment as registered agent. I am familiar with and accept the obligations of the position.					
d Agent's Signature, if changing Registered Agent: the appointment as registered agent. I am familiar with and accept the obligations of the position.					
d Agent's Signature, if changing Registered Agent: the appointment as registered agent. I am familiar with and accept the obligations of the position.	Signature of Ne	ew Registered Agent, if char	nging	-	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Do	<u>ve</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
_X Add	<u>sv</u>	Sally Su	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Кепюче				
4) Change		_		
Add				
Remove				
.5) Change		_		
Add				
Remove				
6)Change		_		
Add				
Remove				

only change is the nar	•	specific)		_	
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<u>If an amendment prov</u>	ides for an exchange	reclassification, or	cancellation of issue	ed shares.	
	nenting the amendme	оэдиндоэ тод и тич	ш тае яшелфшевт п	seu:	
(if not applicable.	,				
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The date of each amendment(s) яdoption:	if other than the
date this document was signed.		
	/16/25	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements. the Department of State's records.	us date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	r action and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
07/ <i>*</i> Dated	6/2025	
Signature UA	UDIA LLANES	
(By a selec	director, president or other officer – if directors or officers have not be ted, by an incorporator – if in the hands of a receiver, trustee, or other inted fiduciary by that fiduciary)	
	Claudia Llanes	
	(Typed or printed name of person signing)	
	Owner	
	(Title of person signing)	

Document to Sign - Claudia Llanes Corp.

Final Audit Report

July 16, 2025

Created:

July 16, 2025

Ву:

ZOMMA Group, LLP(carolina.mesa@zommagroup.com)

Status:

ESigned

Transaction ID:

KWY5KCXAP0CMT6HUNDUV87EFUD

Documents:

Tally Forms.pdf

"Document to Sign - Claudia Llanes Corp." History

- Document emailed to Claudia Llanes(claudia.llanes@elliman.com) for signature
 7/16/2025 11:42:28 AM Eastern Daylight Time
- Document viewed by Claudia Llanes(claudia.llanes@elliman.com)
 7/16/2025 11:45:14 AM Eastern Daylight Time IP address: 108.214.52.173
- Document e-signed by Claudia Llanes(claudia.llanes@elliman.com) Signature Date: 7/16/2025 11:45:35 AM Eastern Daylight Time - IP address: 108.214.52.173
- Document Signed 7/16/2025 11:45:35 AM Eastern Daylight Time