

K21 000352786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

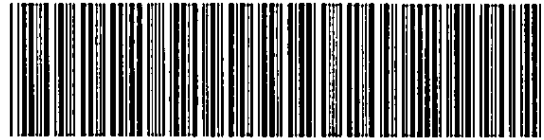
(Business Entity Name)

(Document Number)

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09/03/21 --01020--008 ++25.00

SEP -3 PM 2:30

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: YULIEMENESES 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:

Yulie Meneses
Name of Person

YULIEMENESES LLC
Firm/Company

3401 S Le Jeune Rd.
Address

Coral Gables, FL, 33134
City/State and Zip Code

yuliemeneses@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yulie Meneses at (402) 429-8106
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Just for clarification about the requested changes in the above sections.

1. Registered agent name section : Need to remove "Dr." from the name.

*My bank requested that my name appears in the same format in all the sections.

2. Authorize Person section: Change title from CEO (current) to Managing Member and update name to keep it constant in all sections.

First Name : Yulie

Middle Initial : E.

Last Name: Meneses Gonzalez

2021 SEP - 3 PM 2:30

E. Effective date, if other than the date of filing: _____ **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated August 30 2021

Yulie Meneses Gonzalez
Signature of a member or authorized representative of a member

Yulie Meneses
Typed or printed name of signee