

L16000114430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

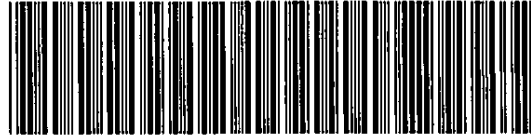
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600289361556

08/31/16--01007--002 **25.00

FILED
2016 AUG 31 P 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

SEP 06 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PROP IT UP PHOTO BOOTHS AND PARTY RENTALS 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:

DEBORAH CASARES

Name of Person

PROP IT UP PHOTO BOOTHS LLC

Firm/Company

121 LAKEVIEW LN

Address

ENGLEWOOD FL. 34223

City/State and Zip Code

DCASARES3@YAHOO.COM

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

For further information concerning this matter, please call:

DEBORAH CASARES

941 468-7939
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PROP IT UP PHOTO BOOTHS AND PARTY RENTALS LLC

FILED
MAR 21 1963
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
8:44
New Registered Agent
the limited liability

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>
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2015-03-31 P 8:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal blue or grey 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 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)

(b) The 90th day after the record is filed.

Dated _____, _____

Obach Co

Signature of a member or authorized representative of a member

DEBORAH CASARES

Typed or printed name of signee

FILED
2016 JUN 31 P 8 44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA