

L19 000275 949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

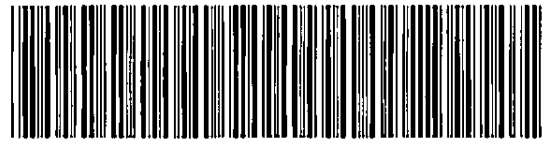
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Income tax form
W24000063023

Office Use Only



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04/02/24--01026--014 **43.75

STATE
MAY 31 2024
PH 12:52

FILED

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Great Plates Artwork
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:

Daniel Brooks
Name of Person

Firm/Company

1739 Verbe Dr
Address

Clearwater, FL 33765
City/State and Zip Code

dan.brooks@greatplates.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Brooks at (727) 401-0882
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

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2024

DANIEL BROOKS III
1739 VERDE DRIVE
CLEARWATER, FL 33765

SUBJECT: GREAT PLATES ARTWORK LLC
Ref. Number: L19000275949

We have received your document for GREAT PLATES ARTWORK LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 724A00008668



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2024

DANIEL BROOKS
1739 VERDE DR
CLEARWATER, FL 33765

SUBJECT: GREAT PLATES ARTWORK LLC
Ref. Number: L19000275949

We have received your document for GREAT PLATES ARTWORK LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 824A00011037

*Please see
signed document.*

*Thank you,
Daniel*

*Rec.
5/31*