

L20 000 219700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

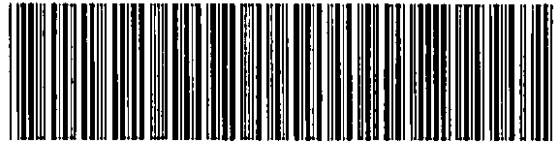
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400349324224

08/20/20 01017--027 **20.00

FILED
2020 AUG 20 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FL

JQ 10/07/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Exclusive Opportunities, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

April Tanya Burns
Name of Person

Exclusive Opportunities, LLC
Firm/Company

11624 Anjali Court
Address

Orlando, Florida 32817
City/State and Zip Code

Aprilburns633@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

April Tanya Burns at (321) 460-6449
Name of Person Area Code & 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 \$55 Filing Fee & Certified Copy