

L02 00000 18315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

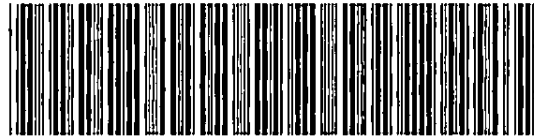
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

6/24/21
TH

Office Use Only



700365301307

05/14/21--01021--006 **25.00

21 MAY 14 PM 2:20

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tiger Investments

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:

Scott Stephens

Name of Person

Tiger Investments

Firm/Company

1810 NE 197th Ter

Address

North Miami Beach, FL 33179

City/State and Zip Code

scott@batterysales.com

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

For further information concerning this matter, please call:

Scott Stephens

786 412-5904
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

1511A 100-102470

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

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

21 MAY 14 PM 2:20

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Scott Stephens	1810 NE 197th Ter	<input type="checkbox"/> Add
		North Miami Beach, FL 33179	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Stephen Stephens	1840 NE 193 St	<input type="checkbox"/> Add
		North Miami Beach, FL 33179	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

21 MAY 14 PM 2: 20

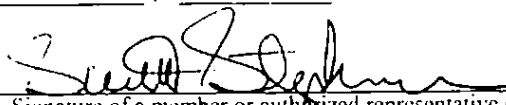
E. Effective date, if other than the date of filing: 5/6/21 (optional)

(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 May 6 2021



Signature of a member or authorized representative of a member

Scott Stephens

Typed or printed name of signee