

LD5000041652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

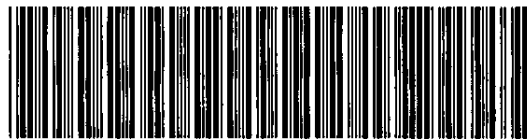
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 20 2013

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **OTAR, 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:

Robin W. Wooten

Name of Person

OTAR, LLC

Firm/Company

414 79th Street

Address

Holmes Beach FL 34217

City/State and Zip Code

avacationstation@yahoo.com

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

For further information concerning this matter, please call:

Robin W. Wooten

Name of Person

941 8128557

at ()

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

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CLERK OF STATE
TALLAHASSEE FLORIDA

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Tim Morris	3012 52nd Ave Dr W	☒ Add
		Bradenton FL 34207	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

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

Dated _____, _____.

Robin W. Wooten

Signature of a member or authorized representative of a member

Robin W. Wooten

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE FLORIDA