

LO5000064 736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

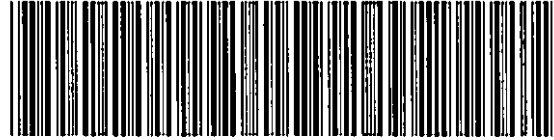
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900298340839

04/25/17--01005--027 **25.00

FILED APR 24 2017

2017 APR 24 PM 12:00

17 APR 25 8:13:29

O SIMMONS

APR 26 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FIRTH COMPANY 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:

JOSEPH P. MULLEN

Name of Person

MULLEN & BIZZARRO, P.A

Firm/Company

2929 E. COMMERCIAL BLVD, PH-C

Address

FORT LAUDERDALE, FL 33308

City/State and Zip Code

JPMULLEN@MULLENBIZZARRO.COM

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

For further information concerning this matter, please call:

JOSEPH P. MULLEN

954

772-9100

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FIRTH COMPANY LLC

Page 1 of 3

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>
MGR	MOLLY L. FIRTH, AS TRUSTEE	8 SENCA ROAD	<input type="checkbox"/> Add
		SEA RANCH LAKES FL 33308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MOLLY CHRISTINE BAUST	16 GATEHOUSE ROAD	<input checked="" type="checkbox"/> Add
		SEA RANCH LAKES FL 33308	<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

Journal of Management Education 30(6)

[illegible]

E. Effective date, if other than the date of filing: _____ (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 APRIL 19, 2017

Joseph P. Mullen
Signature of a member or authority

Signature of a member or authorized representative of a member

JOSEPH P. MULLEN, ESQUIRE

Typed or printed name of signee