

L07000123695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

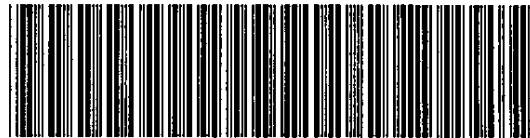
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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S Warren

AUG 26 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: COLEMAN MUSIC AND ENTERTAINMENT 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:

GARY COLEMAN

Name of Person

COLEMAN MUSIC AND ENTERTAINMENT LLC

Firm/Company

1015 HAINES STREET

Address

JACKSONVILLE, FL 32206

City/State and Zip Code

shaas@colemanmusicandentertainment.com

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

For further information concerning this matter, please call:

SUSAN HAAS

904

598-8477

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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	GARY B. COLEMAN, SR.	2016 WATERWAY ISLAND LAN	<input type="checkbox"/> Add
		JACKSONVILLE BEACH, FL 322	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CLERK OF STATE
JACKSONVILLE FLORIDA

[illegible]

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

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TALLAHASSEE, FLORIDA