

LD900009578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

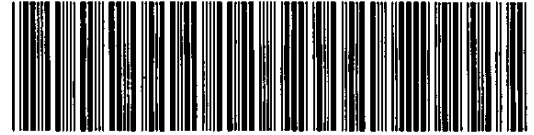
(Document Number)

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2014 OCT 1 10 41 AM
SECRETARY OF STATE
TALLAHASSEE, FL 32305

N. G. G. OCT 1 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Expedite Media 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:

John Krebs

Name of Person

Expedite Media LLC

Firm/Company

3100 S Federal Hwy STE A

Address

Delray Beach, FL 33483

City/State and Zip Code

admin@expresspassport.com

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

For further information concerning this matter, please call:

John Krebs

Name of Person

at (**561**) **459-6196**

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

FILED
2014 SEP 25 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Page 1 of 3

- 7 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>
MGR	Rose Marie Fung	3100 S Federal Hwy	<input checked="" type="checkbox"/> Add
		STE A	<input type="checkbox"/> Remove
		Delray Beach, FL 33483	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____, _____.

Signature of a member or authorized representative of a member
John Krebs
Typed or printed name of signee

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Filing Fee: \$25.00

2014 SEP 23 10:00 AM
SECRETARY OF STATE
TALLAHASSEE, FL 32399