

L09000032627

(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:

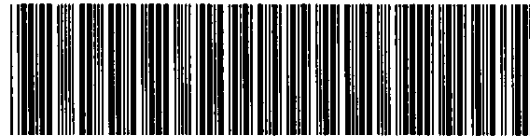
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EXAMINER



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RECEIVED
DIVISION OF STATE
CORPORATIONS

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Brandy Burrige Photography, 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:

Beau Burrige

Name of Person

Brandy Burrige Photography, LLC

Firm/Company

310 W. Newell St.

Address

Winter Garden/FL 34787

City/State and Zip Code

beau@brandyandbeau.com

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

For further information concerning this matter, please call:

Beau Burrige

Name of Person

at (352)

428-7571

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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and assigned

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

Page 1 of 2

MGR = Manager
MGRM = Managing Member

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

Typed or printed name of signee