

LG9000035162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

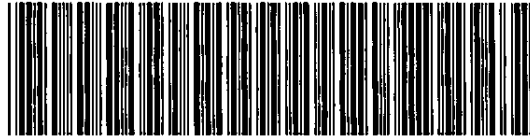
(Business Entity Name)

(Document Number)

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16 MAY -4 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 06 2016
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SLACKERS, 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:

Jonathon W. Baker, Esq.

Name of Person

The Tiller Law Group, P.A.

Firm/Company

15310 Amberly Drive, Suite 180

Address

Tampa, FL 33647

City/State and Zip Code

jbaker@thetillerlawgroup.com

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

For further information concerning this matter, please call:

Jonathon W. Baker, Esq.

813

972-2223

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

SLACKERS, LLC

The Articles of Organization for this Limited Liability Company were filed on April 10, 2009 and assigned
Florida document number L09000035162.

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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>
MGRM	Jon Slack	995 W. State Road 84	☒ Add
		Fort Lauderdale, FL 33315	☐ Remove
			☐ Change
MGRM	Maria Santa Sosa	995 W. State Road 84	☒ Add
		Fort Lauderdale, FL 33315	☐ Remove
			☐ Change
MGRM	Edwine Alexis	1535 Elm Grove Road	☒ Add
		Weston, FL 33327	☐ Remove
			☐ Change
MGRM	Mousline Casseus-Chery	3887 Crestwood Circle	☒ Add
		Weston, FL 33331	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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 TALLAHASSEE, 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.

Dated

April

2016

Signature of a member or authorized representative of a member

Celeste Slack, MGRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA