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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

AUG - 7 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lather Lounge Hair Studio 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:

Michael A. Meadows

Name of Person

Michael A. Meadows, Attorney at Law

Firm/Company

932 South Wickham Road

Address

West Melbourne, FL 32904

City/State and Zip Code

michael@mmeadows.com

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

For further information concerning this matter, please call:

Michael Meadows

Name of Person

at (**321**)

821-2308

Area Code & Daytime Telephone Number

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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

Lather Lounge Hair Studio, LLC

Page 1 of 2

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	CRITTENDEN, JARED R	3199 SUNTREE BLVD SUITE 6 ROCKLEDGE FL 32955	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PHILIP, GOODWIN R JR	3199 SUNTREE BLVD SUITE 6 ROCKLEDGE FL 32955	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 29, 2009

Laura A. Daly

Signature of a member or authorized representative of a member

Laura A. Daly

Typed or printed name of signee