

12/13/24, 11:01 AM  
LD9000113905  
Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : COTTRELL TAX & ACCOUNTING, LLC  
Account Number : I20230000179  
Phone : (239)449-4881  
Fax Number : (239)591-2359

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: admin@cta-tax

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
COTTRELL TAX & ASSOCIATES, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$25.00 |

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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### COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COTTRELL TAX & ASSOCIATES, 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:

BJ Cottrell

Name of Person

Cottrell Tax & Associates, LLC

Firm/Company

5633 Naples Blvd

Address

Naples, FL 34109

City/State and Zip Code

bjc@cta.tax

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

For further information concerning this matter, please call:

BJ Cottrell 239 449-4881  
Name of Person at ( ) 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 Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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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>                      |
|-----------------|-----------------|------------------|--|
| Managing Member | COTTRELL, SUSAN | 2123 Grove Drive | <input type="checkbox"/> Add               |
|                 |                 | NAPLES, FL 34120 | <input checked="" type="checkbox"/> Remove |
|                 |                 |                  | <input type="checkbox"/> Change            |
|                 |                 |                  | <input type="checkbox"/> Add               |
|                 |                 |                  | <input type="checkbox"/> Remove            |
|                 |                 |                  | <input type="checkbox"/> Change            |
|                 |                 |                  | <input type="checkbox"/> Add               |
|                 |                 |                  | <input type="checkbox"/> Remove            |
|                 |                 |                  | <input type="checkbox"/> Change            |
|                 |                 |                  | <input type="checkbox"/> Add               |
|                 |                 |                  | <input type="checkbox"/> Remove            |
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|                 |                 |                  | <input type="checkbox"/> Change            |

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