

L10000003536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

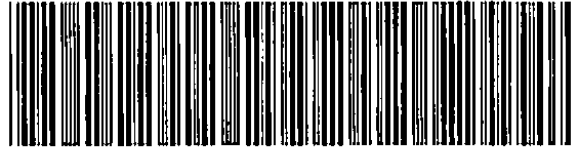
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

O SIMMONS
DEC 17 2020

TO: Registration Section
Division of Corporations

SUBJECT: FINAL LOVING ACT, 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:

Rico Dixon

Name of Person

FINAL LOVING ACT, LLC

Firm/Company

12345 Siltan Peace Dr

Address

Riverview, FL 33511

City/State and Zip Code

info@expediem.com

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

For further information concerning this matter, please call:

Rico Dixon

813

421-4037

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

110

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(A Florida Limited Liability Company)

01/11/2010

2010

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Emer Florida street address

_____, Florida _____
City Zip Code

Z/A

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

LED

<u>Title</u>	<u>Name</u>	<u>Address</u>	2023 NOV 16 PM 3: 36	<u>Type of F</u>
			SIGNATURE OF STATE	<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FL

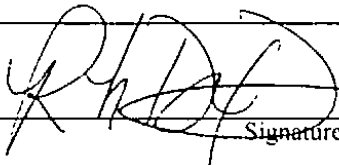
E. Effective date, if other than the date of filing: N/A (optional)

(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 605.6

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 November 13 2020



Signature of a member or authorized representative of a member

Rico Dixon

Typed or printed name of signee