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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

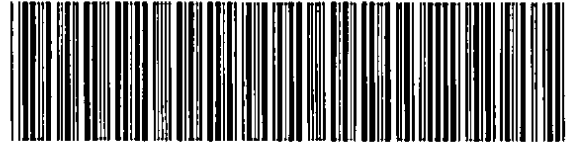
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
OFFICE OF CORPORATIONS
20 APR -1 AM 11:01

Name Change

APR 07 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Charles Clifford Financial, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles C. Ramus Jr.
Name of Person

Charles Clifford Financial LLC
Firm/Company

1002 S. Harbor Isle Blvd.
Address

Tampa FL 33602
City/State and Zip Code

Ramus16@verizon.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles C. Ramus Jr. at (813) 426-6291
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)

→ Please 'APPLY' my \$25. CREDIT AS/ON ATTACHED.

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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CLERK OF STATE
TALLAHASSEE, FL

2016-08-11 11:01:01

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

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[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 March 27, 2020

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

CHARLES C BARNES JR

Typed or printed name of signee

Filing Fee: \$25.00