

L110000638631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

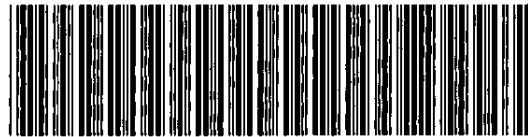
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2011 JUL 22 PM 3:02

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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. HAMPTON

JUL 25 2011

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Animation Kids Place, 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:

Felicia Jackson Stanley  
Name of Person

Animation Kids Place  
Firm/Company

4711 Oleander Dr  
Address

Tallahassee, FL 32305  
City/State and Zip Code

~~animationkids~~ animationkidsplace@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Felicia Jackson Stanley at (850) 322-4725  
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

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SECRETARY OF STATE  
PAUL HASSER, FLORIDA

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	Darius Stallworth	3511 Larkway St. Tallahassee, Fl. 32305	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR M	Wilbert Stanley II	4711 Oleander Dr Tallahassee, Fl. 32305	<input type="checkbox"/> Add <input checked="" 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

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

Please amend to change Felicia T. Jackson  
Stanley  
from MGR to MGR M.

Dated

July 22, 2011

*Felicia Jackson Stanley*

Signature of a member or authorized representative of a member

Felicia Tiffany Jackson Stanley

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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