

L120000 54941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FALL 2019

*Amend*

01/22/19  
FALL 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MEADOWLAND ESTATE, 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:

ANDREY STRIGIN

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

7750 OKEECHOBEE BOULEVARD, Suite #4-571

\_\_\_\_\_  
Address

WEST PALM BEACH, FL 33411

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

ANDREY STRIGIN

646 502 7578

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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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CLERK  
FBI - NEW YORK

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

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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>
MGR	JOANNE GALY	7750 OKEECHOBEE BOULEVARD	<input type="checkbox"/> Add
		Suite #4-571	<input checked="" type="checkbox"/> Remove
		WEST PALM BEACH, FL 33411	<input type="checkbox"/> Change
MGR	ANDREY STRIGIN	7750 OKEECHOBEE BOULEVARD	<input checked="" type="checkbox"/> Add
		Suite #4-571	<input type="checkbox"/> Remove
		WEST PALM BEACH, FL 33411	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

**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.

Dated 9 Jan 2019

ANDREY STRIGIN

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**Filing Fee: \$25.00**