

L12000065884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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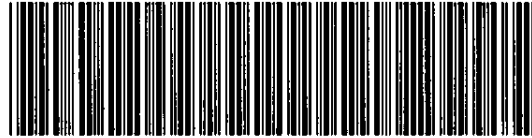
(Business Entity Name)

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2018 APR 12 AM 10:38

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APR 16 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EM Gladiators 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:

James Foster
Name of Person
EM Gladiators LLC
Firm/Company
2045 Carriage Lane
Address
Clearwater FL 33765
City/State and Zip Code
engladiators@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Foster at (727) 512 4112
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

EM GLADIATORS LLC

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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	James R Foster II	2045 Carriage Lane	☐ Add
		Clearwater FL 33765	☐ Remove
			☒ Change
AMBR	Jennifer R. Foster	2045 Carriage Lane	☒ Add
		Clearwater FL 33765	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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Dated 4/9 (April 9) 2018

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SECRETARY OF STATE
TALLAHASSEE FLORIDA