

L12000078447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

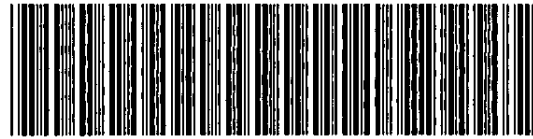
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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2544



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2017 MAR -2 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 20, 2017

ELIZABETH COLLIER
13390 WILLIAM MYERS CT
PALM BEACH GARDENS, FL 33410

SUBJECT: COLLIER ENTERPRISES, LLC
Ref. Number: L12000078447

We have received your document for COLLIER ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

Letter Number: 517A00003283

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Collier Legacy Planning, 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:

Elizabeth Collier

Name of Person

Collier Legacy Planning

Firm/Company

13390 William Myers Ct.

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

ercollier@me.com

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

For further information concerning this matter, please call:

Elizabeth Collier

Name of Person

at (561)

Area Code

951 4714

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

Collier Legacy Planning, LLC

Sky Tek Unmanned,
LLC

Page 1 of 3

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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TALLAHASSEE, FLORIDA

2/20/2017

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

2/13/2017.

Callie

Signature of a member or authorized representative of a member

Elizabeth Collier

Typed or printed name of signee