

L13000010073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2013 AUG 16 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 19 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: knockout services

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:

cameron waters

Name of Person

knockout services

Firm/Company

378 jefferson drive

Address

casselberry florida 32707

City/State and Zip Code

cameronglenwaters@me.com

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

For further information concerning this matter, please call:

cameron waters

Name of Person

at 321 -695-6129

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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TALLAHASSEE, FLORIDA

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knockout services, LLC

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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	CHARLIE WYATT	779 EAST BAY AVENUE LONGWOOD FL 32750	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	CAMERON WATERS	378 JEFFERSON DRIVE	<input checked="" type="checkbox"/> Add
		CASSELBERRY FL 32707	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 7/25/2013

Cameron Waters

Signature of a member or authorized representative of a member

CAMEORN WATERS

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2013

CAMERON WATERS
378 JEFFERSON DRIVE
CASSELBERRY, FL 32707

SUBJECT: KNOCKOUT SERVICES LLC
Ref. Number: L13000010073

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for KNOCKOUT SERVICES 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 document must be signed by a member or an authorized representative of a member.

Please return 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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 313A00018650