

L13 0000 61551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

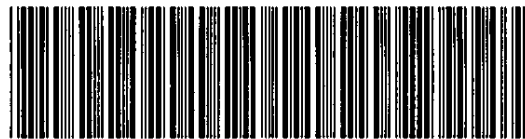
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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16 FEB 24 PM 12:35  
FEB 24 2014  
FEB 24 2014

J. Stivers FEB 25 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TYPALM 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:

Charles Carroll  
Name of Person

TYPALM LLC  
Firm/Company

2295 S. Ocean Blvd., Apt. 801  
Address

Palm Beach, FL 33480  
City/State and Zip Code

carroll75017@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Carroll at (561) 585-4616  
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

TYPALM LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Claude Cargou	2295 S. Ocean Blvd., Apt 809	<input checked="" type="checkbox"/> Add
		Palm Beach, FL 33480	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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14 FEB 2014  
10:35 AM  
FILED  
FBI - MIAMI

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 2/18, 2014.

Charles P. Carroll

Signature of a member or authorized representative of a member

Charles P. Carroll

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

FILED  
14 FEB 26 PM 12:35  
TALLAHASSEE, FL 32304