

LI3000067754

(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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18 APR 30 PM 3:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

MAY - 4 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Helpers in Heels 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:

Leslie Levy  
Name of Person

Helpers in Heels LLC  
Firm/Company

440 Buckskin Ct.  
Address

Winter Springs, FL 32708  
City/State and Zip Code

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

For further information concerning this matter, please call:

Leslie Levy at (386) 837-7519  
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

I Signed  
it 4/25/2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 19, 2018

HELPERS IN HEELS LLC  
LESLIE LEVY  
440 BUCKSKIN CT.  
WINTER SPRINGS, FL 32708

SUBJECT: HELPERS IN HEELS LLC  
Ref. Number: L13000067754

We have received your document for HELPERS IN HEELS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 818A00008031

RECEIVED

2018 APR 30 PM 2:39

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA  
ords.)

The Articles of Organization for this Limited Liability Company were filed on 05/11/2017 and assigned Florida document number L13 000067754.

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>
MGR	Kahn Carley	440 Buckskin Ct	<input type="checkbox"/> Add
		Linker Springs, FL	<input checked="" type="checkbox"/> Remove
		32708	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE

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

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TALLAHASSEE, FLORIDA

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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

4/25/2018

Signature of a member or authorized representative of a member

Typed or printed name of signee