

L13000090878

(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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14 JUN 18 PM 4:15
CLERK OF COURT
TALLAHASSEE, FLORIDA

T. Burch JUN 19 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Eventful Notions 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:

Vanita Smalls

Name of Person

Eventful Notions LLC

Firm/Company

13521 Laranja Street

Address

Clermont FL 34711

City/State and Zip Code

eventfulnotions@gmail.com

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

For further information concerning this matter, please call:

Vanita Smalls

Name of Person

407 756-2170

at ()

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 27, 2014

VANITA SMALLS
13521 LARANJA STREET
CLERMONT, FL 34711

SUBJECT: EVENTFUL NOTIONS LLC
Ref. Number: L13000090878

We have received your document for EVENTFUL NOTIONS 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 effective date must be specific and cannot be prior to the date of filing.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 214A00011397

Eventful Notions 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	Jerome Smalls	13521 Laranja Street	☐ Add
		Clermont FL 34711	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

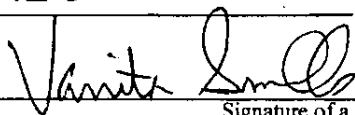
4 JUN 18 PM 1:55
CLERMTON, FLORIDA

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

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 JUNE 9, 2014



Signature of a member or authorized representative of a member

Vanita Smalls

Typed or printed name of signee

FILED
14 JUN 18 PM 4:15
TALLAHASSEE, FLORIDA