

L13000148496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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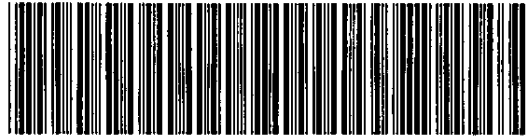
(Business Entity Name)

(Document Number)

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

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J. Shivers DEC 03 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hidden Treasure Holding 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:

Lonnie Alexander  
Name of Person

Hidden Treasure Holding LLC  
Firm/Company

P.O. Box 11948  
Address

Tpa, FL 33680  
City/State and Zip Code

lalexander019@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lonnie Alexander at (813) 331-5288  
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

Hidden Treasure Holding LLC

The Articles of Organization for this Limited Liability Company were filed on 10/21/2013 and assigned Florida document number L13000148496.

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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>
MGRm	Shayeidre Gurtis	5121 N. 20 <sup>th</sup> St	<input type="checkbox"/> Add
		Tpa, FL 33610	<input checked="" type="checkbox"/> Remove
MGRm	Ryan Alexander	3215 E. North Bay st	<input type="checkbox"/> Add
		Tpa, FL 33610	<input checked="" 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.)*

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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 11-19-14, \_\_\_\_\_.

Lonnie Alexander

Signature of a member or authorized representative of a member

Lonnie Alexander

Typed or printed name of signee

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Filing Fee: \$25.00

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