

L14000016138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

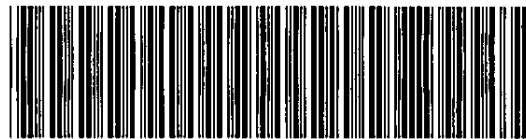
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

JUL 31 2014

1200



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2014

LIUDVIKA VILCINSKAS
5020 CLARK
SARASOTA, FL 34233

SUBJECT: ME TLC, LLC
Ref. Number: L14000016138

We have received your document for ME TLC, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 714A00015368

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ME TLC 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:

LIUDVIRA VILCINSKAS
Name of Person
POWER SAVERS LLC
Firm/Company
5020 CLARK
Address
SARASOTA, FL 34233
City/State and Zip Code
TLCN4LLC@YQ400.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIUDVIRA-JAZA VILCINSKAS at 941 444 1925
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

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ME TLC LLC

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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>
<u>Member</u>	<u>ACHMED TAHA</u>	<u>- 5020 CLARK</u>	<input checked="" type="checkbox"/> Add
		<u>SARASOTA FL, 34230</u>	<input type="checkbox"/> Remove
<u>Member</u>	<u>ALIQUILI ZAMEL</u>	<u>not known</u>	<input type="checkbox"/> Add
			<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
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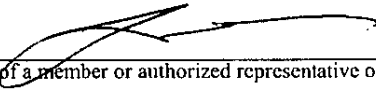
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MIAMI COUNTY FLORIDA

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: 7.1 (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 7/12/2014



Signature of a member or authorized representative of a member
LIDOVIRA JURA VILCINSKAJ

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE FLORIDA