

L14 000036204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

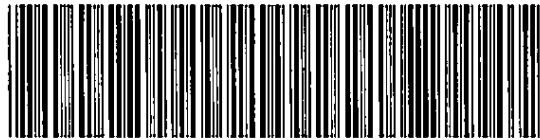
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/18/18--01040--020 **25.00

FILED
18 OCT 18 AM 11:41

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BLACK MARLIN REALTY, 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:

ANTHONY WOODWARD

Name of Person

WOODWARD LAW GROUP

Firm/Company

20727 STERLINGTON DRIVE

Address

LAND O' LAKES FL 33647

City/State and Zip Code

TONY@ANTHONYWOODWARDPA.COM

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

For further information concerning this matter, please call:

OLUSOLA PALACIOS

813

251 2200

at ()

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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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>
PRES.	E. JOSEPH	19046 BRUCE B. DOWNS #221	<input type="checkbox"/> Add
		TAMPA, FL 33647	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	D.JOSEPH	503 E. JACKSON ST. #315	<input checked="" type="checkbox"/> Add
		TAMPA FL 33647	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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18
OCT 18 PM 11:42
2018

13 OCT 1961 PM 11:42

(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)

Dated 10-11-18

Signature of a member or authorized representative of a member

Typed or printed name of signee