

L14000088754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

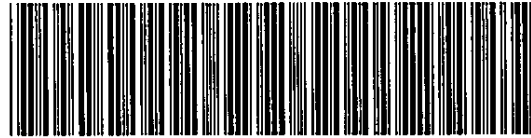
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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S Warren

JAN 19 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ellen Fesmire CRNFA 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:

Ellen Fesmire
Name of Person

Ellen Fesmire, CRNFA
Firm/Company

10110 NW County Road 235
Address

Alachua, FL 32615
City/State and Zip Code

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

For further information concerning this matter, please call:

Ellen Fesmire at (352) 339-6755
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

Ellen Fesmire CRNFA LLC

Woodhaven Surgical Associates, LLC

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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>
ARNP	RACHEL QUINTANA	10110 NW County Road 235 ALACHUA, FL 32615	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(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)

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 JANUARY 13, 2017

Edwin Fosmire

Signature of a member or authorized representative of a member

Ellen Fesmire

Typed or printed name of signee

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Filing Fee: \$25.00

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