

21400089635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

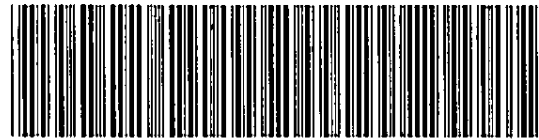
(Business Entity Name)

(Document Number)

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21400089635

JAN 17 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GHOST VAPOR, 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:

TAMMI R. Siegfried
Name of Person

Rena INVESTMENTS, LLC
Firm/Company

902 CARTER ROAD Suite #300
Address

WINTER GARDEN, FL 34787
City/State and Zip Code

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

For further information concerning this matter, please call:

Tammi Siegfried at (407) 654-3172
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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2017

TAMMI L SIEGFRIED
14149 EDEN ISLAND BOULEVARD
WINDERMERE, FL 34786

SUBJECT: GHOST VAPOR, LLC
Ref. Number: L14000089635

We have received your document for GHOST VAPOR, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 617A00024090

Thank you

We are returning the corrected form
for processing.

RECEIVED
JAN 16 2018

GHOST VAPOR, LLC

Page 1 of 3

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>
<u>P</u>	<u>Tammi L. Siegfried</u>	<u>14149 Eden Isle Blvd</u>	<input type="checkbox"/> Add
		<u>Windermere FL 34786</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>V</u>	<u>JOHN WATSON</u>	<u>14016 LAKE TILDEN BLVD</u>	<input type="checkbox"/> Add
		<u>WINTER GARDEN, FL 34787</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>P</u>	<u>RENA INVESTMENTS LLC</u>	<u>902 Caetoz Rd Suite #300</u>	<input checked="" type="checkbox"/> Add
		<u>WINTER GARDEN, FL 34787</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

(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 01.12.18 , _____.

Tammi R. Simpfied
Typed or printed name of signer