

L14 000121911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

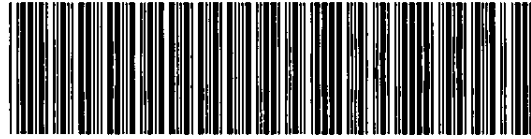
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100265521731

10/20/14--01012--009 **25.00

FILED
14 OCT 20 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 20 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENHANCED MOVEMENT 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:

JEFF RICHARDS

Name of Person

ENHANCED MOVEMENT LLC

Firm/Company

1881 79th Street Cswy. #1103, #

Address

NORTH BAY VILLAGE, FL 33141

City/State and Zip Code

ENHANCED.MOVEMENTS@GMAIL.COM

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

For further information concerning this matter, please call:

JEFF RICHARDS

Name of Person

at (786) 859-2254

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:

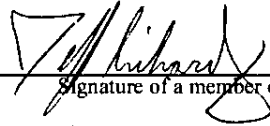
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt of filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated OCTOBER, 15th, 2014.



Signature of a member or authorized representative of a member

JEFFREY RICHARDS

Typed or printed name of signee

FILED
14 OCT 20 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA