

L14000127483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

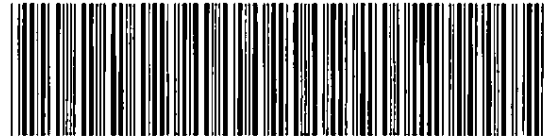
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/16/23--01011--017 **25.00

10/16/23
DIVISION OF STATE
CORPORATIONS
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R. HUNT

10/16/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHARTER MANAGER, 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:

William B. Smith Jr.

Name of Person

Charter Manager, LLC

Firm/Company

4751 Jim Walter Blvd.

Address

Tampa, Florida 33607

City/State and Zip Code

will@willsmithaviation.com

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

For further information concerning this matter, please call:

William B. Smith Jr.

813

482-3440

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

If Changing Registered Agent, Signature of New Registered Agent

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>
MGRM	Scott Meyer	18319 TEMPLE AVE	<input type="checkbox"/> Add
		Port Charlotte, Florida 33948	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	William B. Smith Jr.	4751 Jim Walter Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeffrey Parker	4751 Jim Walter Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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DIVISION OF CORPORATIONS
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E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 October 12

2023

Signature of a member or authorized representative of a member

William B. Smith Jr.

Typed or printed name of signee

Filing Fee: \$25.00