

L14 000138407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

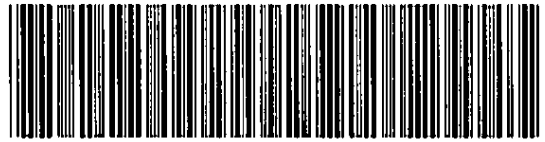
(Business Entity Name)

(Document Number)

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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>
MGRM	COLEMAN, PATRICK	PO BOX 1678	<input type="checkbox"/> Add
		ANNA MARIA FL 34216	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	COLEMAN, MICHEAL	PO BOX 1678	<input type="checkbox"/> Add
		ANNA MARIA FL 34216	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BEALS, KAITLIN	PO BOX 1678	<input checked="" type="checkbox"/> Add
		ANNA MARIA FL 34216	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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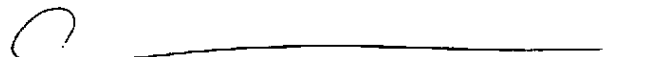
E. Effective date, if other than the date of filing: _____ (optional)

(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 JULY 22, 2022


Signature of a member or authorized representative of a member

PATRICK COLEMAN

Typed or printed name of signer