# 1400 H3390

(Requestor's Name)				
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE
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EFFEOTIVE DATE

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FLORIDA DEPAR	RTMENT OF STATE	142 700400
*	Date:	e815
RECEIVED FROM: Michele Van Sor		
the sum of Thirty and 00/100-	Dollars \$30.0	O.C.
For the following: Afficles of Organiz	ation - Michele V	anson LLC
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	Showed lan	一题表示
	0	for Secretary of State
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THIS MONEY PAID INTO THE STATE TREASURY

All receipts issued and papers filed subject to clearing and final payment of remittance check.

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Michele Van Son 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:
Michele Van Son  Name of Person  Ecclesia Consulting  Firm/Company
1044 Golfside Dr SA S
City/State and Zip Code  Michele Code Colesia Onsulting, Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michele Van Son at (407) 252-2655  Name of Person at (407) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee  Certificate of Status  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

## or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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