

L14000159606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
15 JUN -3 AM 3:45
TALLAHASSEE, FLORIDA

JUN 08 2015

3 MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YOUR LAB, 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:

STACY L. KOHN

Name of Person

JECK, HARRIS, RAYNOR & JONES, P.A.

Firm/Company

790 JUNO OCEAN WALK, SUITE 600

Address

JUNO BEACH, FL 33408

City/State and Zip Code

jraynor@jhrjpa.com

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

For further information concerning this matter, please call:

STACY L. KOHN

561

746.1002

Name of Person

at ()

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

FILED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
45 JUN -3 AM 3:45



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2015

STACY L. KOHN
790 JUNO OCEAN WALK SUITE 600
JUNO BEACH, FL 33408

SUBJECT: YOUR LAB, LLC
Ref. Number: L14000159606

We have received your document for YOUR LAB, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on June 2, 2015.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 315A00011648

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SECRETARY OF STATE

DIVISION OF CORPORATIONS

JAN 3 1980

TALLAHASSEE, FLORIDA

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>
MGR	JOSEPH W. MUNDEN, III	2340 SW POMA DRIVE	<input type="checkbox"/> Add
		PALM CITY, FL 34990	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RAJENDRA MELARAM	514 PEPPER STREET NE	<input checked="" type="checkbox"/> Add
		PALM BAY, FL 32907	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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 handwriting or other markings on the paper.

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

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 MAY 26ST 2015

[Signature]
Signature of a member

RAJENDRA MELARAM

Typed or printed name of signee

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