

L14000170824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

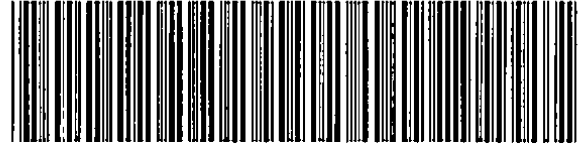
(Business Entity Name)

(Document Number)

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2019 SEP 18 PM 4:40
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C. GOLDEN

SEP 19 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E MARKETING CONSULTANTS, 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:

CARLOS IXTLAHUAC

Name of Person

E MARKETING CONSULTANTS, LLC

Firm/Company

5840 W CYPRESS ST, STE F

Address

TAMPA, FL 33607

City/State and Zip Code

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

For further information concerning this matter, please call:

CARLOS IXTLAHUAC

Name of Person

813 901-4910
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

E Marketing Consultants, LLC

FACSIMILE TRANSMITTAL SHEET

TO:	FAX NUMBER:
Attn: Rebecca	850-245-6897
FROM:	DATE:
CARLOS INTLAHUAC	9/17/19
COMPANY:	TOTAL NO. OF PAGES, INCLUDING COVER:
FL Div. of Corporations	5
RE:	
Articles of Amendment	
SENDER'S INFO FOR:	
CARLOS INTLAHUAC	TEL (813) 901-4910

This correspondence may contain information that is confidential, proprietary or "non-public personal information", as that term is defined in the Gramm-Leach-Bliley Act (collectively, "Confidential Information"). The Confidential Information is disclosed conditioned upon your agreement that you will treat all Confidential Information confidentially and in compliance with applicable law, ensure that such information is not used or disclosed except for the limited purpose for which it is being provided and will notify and cooperate with EMC regarding any requested disclosure or any unauthorized disclosure or use of any Confidential Information. By accepting and reviewing the Confidential Information you agree to indemnify EMC against any losses or expenses, including attorney's fees that EMC may incur as a result of any unauthorized use or disclosure of the Confidential Information due to your acts or omissions. If this correspondence is received by a party other than the intended recipient, you are requested to immediately notify us of the erroneous delivery and return to us all information so delivered immediately.

Please find updated document for amendment.

Thank you,
Carlos

2019 SEP 18 PM 10:06



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 6, 2019

CARLOS ILLAHUAC
5840 W CYPRESS ST STE F
TAMPA, FL 33607

SUBJECT: E MARKETING CONSULTANTS, LLC
Ref. Number: L14000170824

We have received your document for E MARKETING CONSULTANTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 419A00018417

100

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 3

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>
PRES	CARLOS IXTLAHUAC	5840 W. CYPRESS ST, STE F TAMPA, FL 33607	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MELVIN JACOBSON	5840 W. CYPRESS ST, STE F TAMPA, FL 33607	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KEITH MUCHLER	5840 W. CYPRESS ST, STE F TAMPA, FL 33607	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 are no margins, text, or other markings on the paper.

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 August 22, 2019

Carlos I Hahindo

Signature of a member or authorized representative of a member

CARLOS IXTLAHLAC

Typed or printed name of signee