

L15000043773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

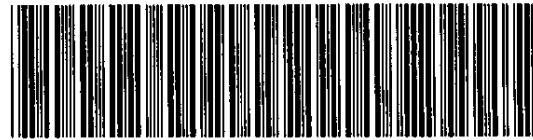
(Business Entity Name)

(Document Number)

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17 AUG 28 AM 7:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 29 2017

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sweetees
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:

Sarah Demboski
Name of Person

Sweetees
Firm/Company

2465 Club Lake Dr.
Address

Orange Park FL 32065
City/State and Zip Code

hello@sweetees.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah Demboski at 904 338-2356
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Sweeties

The Articles of Organization for this Limited Liability Company were filed on 3/10/15 and assigned Florida document number L15000043773.

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>
AMBR	William Demboski	2465 Club Lake Drive	<input type="checkbox"/> Add
		Orange Park, FL 32065	<input checked="" 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"/> Change

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

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17 AUG 28 AM 3:40
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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 8/21/17 (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 21st, 2017.

Signature of a member or authorized representative of the organization

Sarah Demboski

Typed or printed name of signee