

LIS000103946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

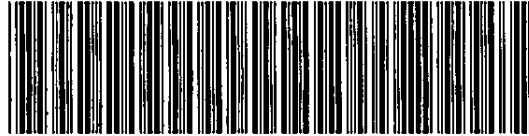
(Business Entity Name)

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Emeraldwater Foods 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:

Carter Brown

Name of Person

Emeraldwater Foods LLC

Firm/Company

904 Fairway Dr.

Address

Pensacola, FL 32507

City/State and Zip Code

flatwater3@bellsouth.net

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

For further information concerning this matter, please call:

Carter A. Brown

850

712-2321

at (_____) _____

Name of Person

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

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TALLAHASSEE, FLORIDA
Office of New Registered Agents

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	Carter A. Brown	904 Fairway Dr.	☐ Add
		Pensacola, Fl. 32507	☐ Remove
			☒ Change
AMBR	Stuart H. Brown	7623 Brook Forest Way	☐ Add
		Pensacola, Fl. 32514	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
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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.

Dated 3/7, 2016


Signature of a member or authorized rep.

Signature of a member or authorized representative of a member

Carter A. Brown

Typed or printed name of signee

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