

L15000163739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

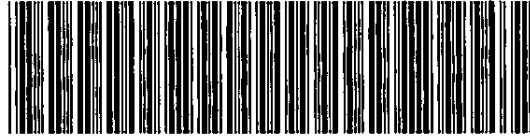
(Business Entity Name)

(Document Number)

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L15-163739

Amend

11/05/15--01006--016 **25.00

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15 NOV -5 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV -6 2015

N. CAUSSEUX

COVER LETTER

**TO: Registration Section,
Division of Corporations**

SUBJECT: 5200 Sample Rd,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:

Mark Alsentzer

Name of Person

5200 Sample Rd,LLC

Firm/Company

11742 paradise cove lane

Address

Wellington,Fl 33449

City/State and Zip Code

markalsentzer@hotmail.com or 5200sample@gmail.com

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

For further information concerning this matter, please call:

Mark Alsentzer

954 547-4043
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

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	Luz Alsentzer	11742 paradise cove lane, Wellington, FL 33417	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FLORIDA
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)


Multiple horizontal lines for amending information.

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: October 17, 2015 (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 October, 17, 2015


Signature of a member or authorized representative of a member

Mark Alsentzer
Typed or printed name of signee