

L15000200073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000279957370

12/21/15--01028--031 **25.00

FILED
2015 DEC 21 PM 1:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 22 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Soul Cake LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa J Brown

Name of Person

Firm/Company

1715 11th St

Address

Fort Lauderdale, FL 33304

City/State and Zip Code

Lisa@healthybodynow.net

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

For further information concerning this matter, please call:

Joseph Spina

Name of Person

at (954)

328-9004

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

