

L16 0000 10742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

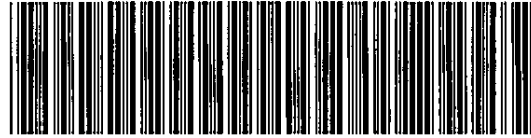
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200289986132

09/09/16--01022--015 **25.00

FILED
2016 09-09 P 1:21
CLERK OF STATE
TALLAHASSEE, FLORIDA

S Warren

SEP 12 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hormones 4 You 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:

Jacqueline Spiro

Name of Person

Hormones 4 You LLC

Firm/Company

2004 Valencia Drive

Address

Delray Beach, FL 33445

City/State and Zip Code

organize47@aol.com

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

For further information concerning this matter, please call:

Jacqueline Spiro

at (561) 289-9057

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>
MGR	Jacqueline Spiro	2004 Valencia Dr.	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33445	<input 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
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input 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
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single page from a notebook or ledger. It features ten evenly spaced horizontal black lines across its width. The top margin contains some faint, illegible handwritten marks. The rest of the page is blank except for the lines.

(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)

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.

R. Estera
Signature of a member or authorized representative of a member

Ricardo Estera
Typed or printed name of signee

FILED
2017 JUN -9 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA