

h16000062336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

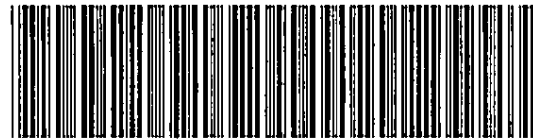
Special Instructions to Filing Officer:

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TALLMAN SEC. FL

2022 MAY 24 PM 12:26

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05/24/22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Marine Lighting Solutions, 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:

John Porter

Name of Person

Firm/Company

2860 W. State Rd 84

Address

Ft. Lauderdale, FL. 33312

City/State and Zip Code

brandi @apollo lighting . com

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

For further information concerning this matter, please call:

Brandi Porter

Name of Person

at (813)

Area Code

917-1539

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAY 16 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FL

April 28, 2022

BRANDI PORTER
2860 W STATE ROAD 84
SUITE 114
FORT LAUDERDALE, FL 33312

SUBJECT: MARINE LIGHTING SOLUTIONS, LLC
Ref. Number: L16000062336

We have received your document for MARINE LIGHTING SOLUTIONS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The entity's date of incorporation/organization must be listed in the document.

Please correct the document number for the company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 822A00009921

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>
<u>MGR</u>	<u>Brandi Porter</u>	<u>SAME</u>	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>John Porter</u>	<u>2860 W. State Rd</u>	<input checked="" type="checkbox"/> Add
		<u>Ste 1114</u>	<input type="checkbox"/> Remove
		<u>Pt Lauderdale, FL 33312</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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)

Dated

5/9/22

Brandi Port

Signature of a member or authorized representative of a member

BRAND, Porter

Typed or printed name of signee