

**L16 0000 66344**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

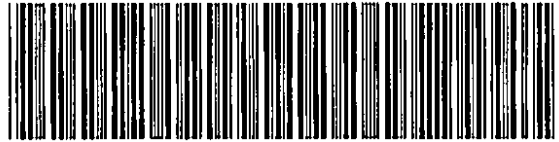
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AND  
FILED

2019 MAR 12 AM 11:30

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

T.G.  
3/25/19

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VITAL LINE ENTERPRISES, 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:

ASHLEY LOUITAN

Name of Person

VITAL LINE ENTERPRISES, LLC

Firm/Company

7006 IRONWOOD DRIVE

Address

ORLANDO, FL 32818

City/State and Zip Code

JATAVEIUS@AOL.COM

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

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

ASHLEY LOUITAN

407 223-7087

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## VITAL LINE ENTERPRISES, LLC

Page 1 of 3

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

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 03-12-2011 BY SP-6  
STW/STW

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Amending Operation Agreement for Vital Line Enterprises, LLC

Ashley Louitan Percentage of Interest 51% and Resia Louitan Percentage of Interest 49%

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TALLAHASSEE, FLORIDA

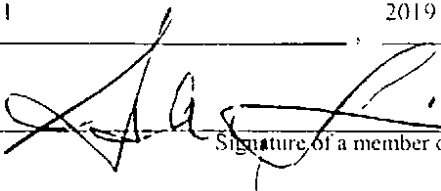
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 March 11, 2019

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Ashley Louitan

\_\_\_\_\_  
Typed or printed name of signee