

L16000071898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

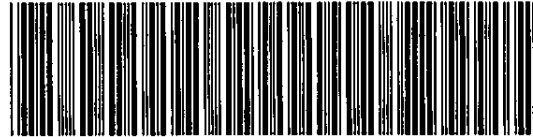
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2017 JAN -5 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

JAN -6 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INNOVIS USA 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:

BENJAMIN A. BLOWERS
Name of Person

INNOVIS USA LLC
Firm/Company

5540 LEESWAY BLVD
Address

PENSACOLA FL 32504
City/State and Zip Code

ba. blowers @ gmail. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BENJAMIN A. BLOWERS at (850) 686-7586
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

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SECRETARY
ATTORNEY

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L 160000 71898

A. If amending name, enter the new name of the limited liability company here:

Pharosia F1 32504

Periactula FI 32504

Zip Code

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>COO</u>	<u>LYEMANCE, MERIDETH E</u>	<u>1704 Kensington Dr</u>	<input type="checkbox"/> Add
		<u>Birmingham, AL 32509</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>CFO</u>	<u>Pitts, James R, JR</u>	<u>25 Beech Circle</u>	<input type="checkbox"/> Add
		<u>Birmingham, AL 32513</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>CAO</u>	<u>Sweeney, William D</u>	<u>1624 Hwy 303</u>	<input type="checkbox"/> Add
		<u>shelby, AL 35143</u>	<input checked="" 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

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TALLAHASSEE, FL 32304

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TALLAHASSEE, FLORIDA

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.

Dated January 4, 2017

BENTON BLUES

Filing Fee: \$25.00