

L16000105522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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AUG 01 2016  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CRYSTAL BALLROOM MANAGEMENT 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:

LUKASZ ROGOWSKI

Name of Person

T & L MANAGEMENT & INVESTMENTS LLC

Firm/Company

861 BALLOUGH ROAD

Address

DAYTONA BEACH FL 32114

City/State and Zip Code

rick @ hmrcpa.net

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

For further information concerning this matter, please call:

RICHARD MANN

Name of Person

at ( 407 )

Area Code

322 4854

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

CRYSTAL BALLROOM MANAGEMENT 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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SECURITY  
FALL 2000  
PH 505  
DATE  
PERIOD

[illegible]

**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.

(b) The 90th day after the record is filed.

7-19, 2016



Signature of a member or authorized representative of a member

LUKASZ ROGOWSKI

Typed or printed name of signee

**Filing Fee: \$25.00**

16-10-23 PM 1:55  
SECRETARY OF STATE  
FALLS CHURCH VA 22044