

L16000129737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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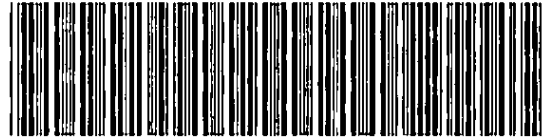
(Business Entity Name)

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FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
22 APR 25 PM 3:19

T. MATTHEWS

JUN 14 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAPP, 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:

ANTHONY PEYINGHAUS
Name of Person

AAPP, LLC
Firm/Company

13799 PARK BLVD. #117
Address

SEMINOLE FL 33776
City/State and Zip Code

PEYINGHAUSA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY PEYINGHAUS at 727 422-3260
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 Address:

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS

22 APR 25 PM 3: 19

(A Florida Limited Liability Company)

, Florida

If Changing Registered Agent, Signature of New Registered Agent

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>MBR</u>	<u>ALESIA PEYINGHAUS</u>	<u>4300 BIRCH ST. NE</u> <u>ST. PETE, FL 33703</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MBR</u>	<u>ANTHONY PEYINGHAUS</u>	<u>4260 49TH ST. N.</u> <u>ST. PETERSBURG, FL 33709</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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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)

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 4/4/2022, April 9, 2022

Signature of _____

ALESHA PEYINGHAUS

Typed or printed name of signee

Filing Fee: \$25.00