

L16000132167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

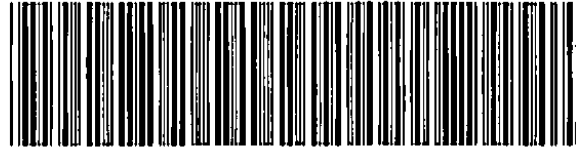
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/28/19--01003--029 **25.

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2019 JUL 28 PM 3:24

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JUL 11 2019

T. L. HENRY

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BOUNDLASS HOLDINGS 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:

Walter Stocker

Name of Person

Biz Accountants

Firm/Company

1070 W Horizon Ridge Pkwy Ste 111

Address

Henderson, NV 89012

City/State and Zip Code

bizaccountants@yahoo.com

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

For further information concerning this matter, please call:

Walter Stocker

702

480-4341

at ()

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

[illegible]

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

RECORDED JUL 28 P 3: 34

7/13/2016

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added, changed, or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MIKE NIXON	PO BOX 92222	<input type="checkbox"/> Add
		HENDERSON, NV 89002	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL ROHLAND	1070 W Horizon Ridge Pkwy Ste 1	<input checked="" type="checkbox"/> Add
		Henderson, NV 89012	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

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 605.02C

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.

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

Dated _____ JUNE 24 2019

[Handwritten signature]

Signature of a member or authorized representative of a member

WALTER STOCKER

Typed or printed name of signee