

L16000153042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

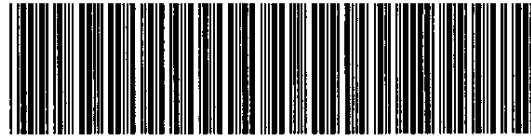
(Business Entity Name)

(Document Number)

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17 MAY 26 PM 1:57  
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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>                   |
|--------------|----------------------|---------------------------|-----------------------------------------|
| MGR          | MARIE YANICK PYRRHUS | 6346 PINESTEAD DR #1016   | <input checked="" type="checkbox"/> Add |
|              |                      | LAKE WORTH FL 33463       | <input type="checkbox"/> Remove         |
|              |                      |                           | <input type="checkbox"/> Change         |
| MGR          | JOHANNE K ALEXANDRE  | 113 MORGATE CIRCLE,       | <input checked="" type="checkbox"/> Add |
|              |                      | ROYAL PALM BEACH FL 33411 | <input 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         |
|              |                      |                           | <input type="checkbox"/> Add            |
|              |                      |                           | <input type="checkbox"/> Remove         |
|              |                      |                           | <input type="checkbox"/> Change         |
|              |                      |                           | <input type="checkbox"/> Add            |
|              |                      |                           | <input type="checkbox"/> Remove         |
|              |                      |                           | <input type="checkbox"/> Change         |

17 MAY 2011 11:57 PM

47 MAY 26 PM 1:31

77 11/28 PM 1:51

(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.

Signature of a member or authorized representative of a member

Typed or printed name of signee