

116000 155202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

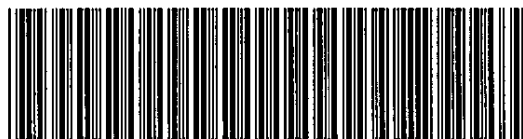
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/23/16--01008--001 **25.00

16 SEP 23 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SP TAX GROUP 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:

HUBERT MCINTOSH

Name of Person

RE-MMAP INC

Firm/Company

4500 Belvedere Rd, Ste A-3

Address

West Palm Beach, FL 33415

City/State and Zip Code

info@re-mmmap.com

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

For further information concerning this matter, please call:

Hubert McIntosh

561 623-0241

Name of Person

at ()

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

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	KENNETH S. FEYERS	11555 Heron Bay Blvd, Ste 200	☐ Add
		Coral Springs, FL 33065	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 SEP 23 AM 7:12
STREET OF STATE
TALLAHASSEE, FLORIDA

(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)

Dated 9-20, 2016

Signature of a member or authorized representative of a member

HUBERT MCINTOSH
Typed or printed name of signee