

L16 000167690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

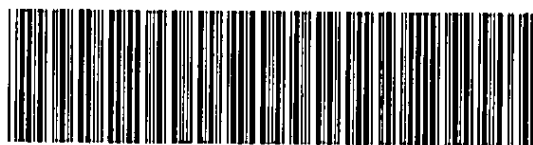
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS
DEC 15 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LIVE LINK MEDIA, 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:

Kenneth Ferguson

Name of Person

LIVE LINK MEDIA, LLC

Firm/Company

7104 Catalonia Ave

Address

Jacksonville, Florida 32217

City/State and Zip Code

Ferguson.Ken.Wayne@Gmail.com

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

For further information concerning this matter, please call:

Kenneth Ferguson

904 613-9811
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 Address:

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

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(Name of the Limited Liability Company as it now appears on our records.) OF STATE
(A Florida Limited Liability Company) TALLAHASSEE, FL

If Changing Registered Agent, Signature of New Registered Agent

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2023 NOV -9 PM 5:40

Type of Action

STATE OF FLORIDA
a Monica, CA, 90405 STATE
MILLABASPE FL

712 Marine St., Santa Monica, CA, 90405 STATE

☐ Change

SECRETARY OF STATE
TALLAHASSEE, FL

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.

Dated

November 3, 2020

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Kenneth Wayne Ferguson

Typed or printed name of signee

Filing Fee: \$25.00