

L16000202973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

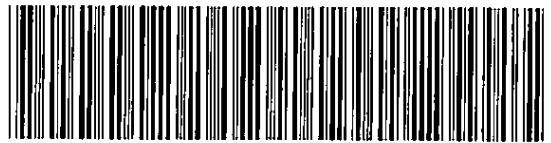
(Business Entity Name)

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JUL 30

S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAACK, SIMMS & REIGHARD, PLLC

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:

JAMES A. STAACK

Name of Person

STAACK & SIMMS, PLLC

Firm/Company

51 S. MAIN AVENUE, SUITE 319

Address

CLEARWATER, FL 33765

City/State and Zip Code

Jim@staacklaw.com

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

For further information concerning this matter, please call:

JAMES A. STAACK

727 441-2635
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

2024 JUN 18 PM 6:00
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DATE 07-19-2011 BY 60322 UCBAW/BJS

and assign

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

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(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 JULY 15 2024

James I. Stewart
Signature of a member or author

Signature of a member or authorized representative of a member

JAMES A STAACK

Typed or printed name of signee

2024 JUL 18 PM 6:10

Filing Fee: \$25.00