

L16000221818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

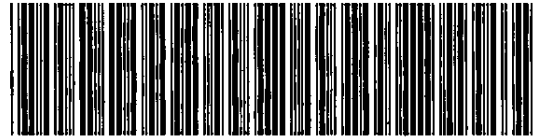
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S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 JAN 20 AM 11:24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2017

TANYA PARKER
NATIONAL CREDIT BOOSTER, LLC
703 GRANT AVENUE
LEHIGH ACRES, FL 33972

SUBJECT: NATIONAL CREDIT BOOSTER L.L.C.
Ref. Number: L16000221818

We have received your document for NATIONAL CREDIT BOOSTER L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

~~The registered agent must sign accepting the designation.~~

~~Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.~~

We have received your document for NATIONAL CREDIT BOOSTER L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Tanya Parker

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TALLAHASSEE, FLORIDA

FILED
17 JAN 20 AM 11:24
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: National Credit Booster, 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:

Tanya Parker

Name of Person

National Credit Booster, LLC

Firm/Company

703 Grant Ave

Address

Lehigh Acres, FL 33972

City/State and Zip Code

nationalcreditboosters@gmail.com

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

For further information concerning this matter, please call:

Tanya Parker

239 672-6244
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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

National Credit Booster, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 1/1/2017 and assigned
Florida document number 116000221818.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Tanya Parker

New Registered Office Address: 703 Grant Ave
Enter Florida street address

Lehigh Acres, Florida 33972
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of New Registered Agent

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>
AP	Romanuel Parker	703 Grant Ave	<input type="checkbox"/> Add
		Lehigh Acres, FL 333972	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tanya Parker	703 Grant Ave	<input checked="" type="checkbox"/> Add
		Lehigh Acres, FL 33972	<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"/> Change

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TALLAHASSEE, FLORIDA
JAN 20 AM 11:35
17 JAN 20

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

I am including a copy of my marriage certificate in order to change my last name from Tanya Aldridge to

Tanya Parker. I am going to be the registered agent and a managing Member

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TALLAHASSEE, FLORIDA

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 605.0207 (3)(b)

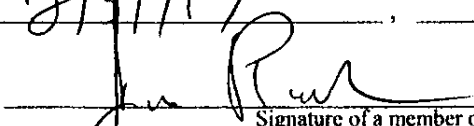
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated

2/3/17



Signature of a member or authorized representative of a member

Tanya Parker

Typed or printed name of signee