

L17000002161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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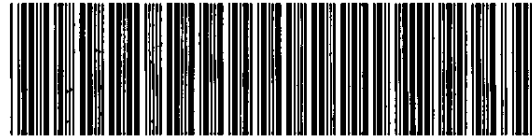
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
18 MAR - 7 PM 7:03

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4-EVERGONE, 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:

Attn: Gabrielle Usha
Name of Person

4-EVERGONE, LLC
Firm/Company

6970 NW 83rd Terrace
Address

PARKLAND, FL 33067
City/State and Zip Code

gabrielle.v@4-evergone.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gian Gordon-White at (954) 752-5296
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

4-EVERGONE, LLC

N/A

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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	DARREN FROST	C/O 4-EVERGDNE, LLC	☒ Add
		6970 NW 83rd Terrace	☐ Remove
		PARKLAND, FL 33067	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Change
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			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

[This section contains horizontal lines for amendments, which have been crossed out with a large diagonal line.]

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E. Effective date, if other than the date of filing: 3/2/2018 (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 3/2/2018

[Handwritten signature]

Signature of a member or authorized representative of a member

JERRY FROST

Typed or printed name of signee