

L17000011757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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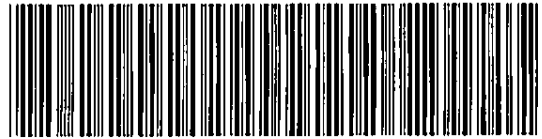
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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PURSUIT PROFESSIONAL SERVICES 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:

LAZARO M. RODRIGUEZ JR.

\_\_\_\_\_  
Name of Person

PURSUIT PROFESSIONAL SERVICES LLC

\_\_\_\_\_  
Firm/Company

4831 SW 205TH AVENUE

\_\_\_\_\_  
Address

SOUTHWEST RANCHES FL 33332

\_\_\_\_\_  
City/State and Zip Code

EPIXLOG@GMAIL.COM

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

For further information concerning this matter, please call:

LAZARO M. RODRIGUEZ JR.

954 909-1173  
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

**If Changing Registered Agent, Signature of New Registered Agent**



This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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.

Dated FEBRUARY 11 2023

Luzmo M. [Signature]  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**