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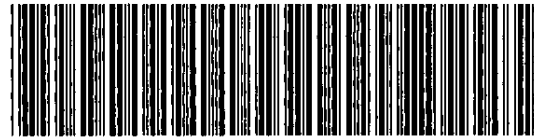
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

MAR 22 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

A Pink Glove Service, 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:

Kim Martell

Name of Person

A Pink Glove Service, LLC

Firm/Company

8744 23rd Street

Address

Zephyrhills, FL 33540

City/State and Zip Code

pinkgloveservice17@gmail.com

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

For further information concerning this matter, please call:

Kim Martell

Name of Person

at

813

Area Code

525-5583

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

A Pink Glove Service, LLC

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FILED
MAR 20 P 08:11
CLERK OF DISTRICT COURT
STATE OF FLORIDA
Newly Registered Agent

MGR = Manager
AMBR = Authorized Member

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Dated March 15, 2017.

Kim H. Markel
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Kim M. Martell

Typed or printed name of signee

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TALLAHASSEE, FLORIDA