

L17000039686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

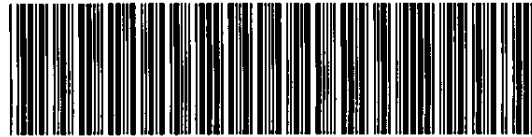
(Business Entity Name)

(Document Number)

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O SIMMONS  
APR 09 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: I+ Takes III Liquors, 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:

Nicole Rogers

Name of Person

Firm/Company

1980 South Glades Dr. Apt 24

Address

North Miami Beach, FL 33142

City/State and Zip Code

Pro1.Nicole@gmail.com

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

For further information concerning this matter, please call:

Nicole Rogers

Name of Person

at (954) 598-2797

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

It Takes III Liquors, LLC

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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          | Nicole Pro    |                                           | <input type="checkbox"/> Add               |
|              |               | 1980 South Glades dr Apt 24, NMB FL 33142 | <input checked="" type="checkbox"/> Remove |
|              |               |                                           | <input type="checkbox"/> Change            |
| MGR          | Nicole Rogers | 1980 South Glades dr Apt 24               | <input checked="" type="checkbox"/> Add    |
|              |               | North Miami Beach FL 33142                |                                            |
|              |               |                                           | <input type="checkbox"/> Remove            |
|              |               |                                           | <input type="checkbox"/> Change            |
|              |               |                                           | <input type="checkbox"/> Add               |
|              |               |                                           | <input type="checkbox"/> Remove            |
|              |               |                                           | <input type="checkbox"/> Change            |
|              |               |                                           | <input type="checkbox"/> Add               |
|              |               |                                           | <input type="checkbox"/> Remove            |
|              |               |                                           | <input type="checkbox"/> Change            |
|              |               |                                           | <input type="checkbox"/> Add               |
|              |               |                                           | <input type="checkbox"/> Remove            |
|              |               |                                           | <input type="checkbox"/> Change            |

17 APR - 10 AM

**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 April 1, 2017

Signature of a member or authorized representative of a member

Typed or printed name of signee