

L17000043772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

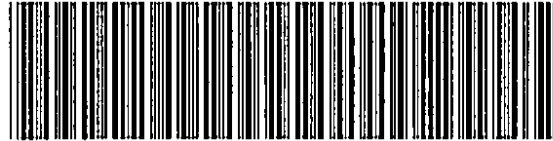
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ladybug Property Solutions 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:

Amynette England

Name of Person

Ladybug Property Solutions LLC

Firm/Company

15013 Green Valley Blvd

Address

Clermont, FL 34711

City/State and Zip Code

crystal@cashwellaccounting.com

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

For further information concerning this matter, please call:

Amy England

407 538-8867  
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

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**If Changing Registered Agent, 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>
MGR	AMYNETTE ENGLAND	15013 GREEN VALLEY BLVD	<input checked="" type="checkbox"/> Add
		CLERMONT, FL 34711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	AMYNETTE LACHIUSA	15013 GREEN VALLEY BLVD	<input type="checkbox"/> Add
		CLERMONT, FL 34711	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**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 JUNE 27 2022

*Amyrrette England*  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

AMYNETTE ENGLAND

Typed or printed name of signee

Filing Fee: \$25.00