

L17000070907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

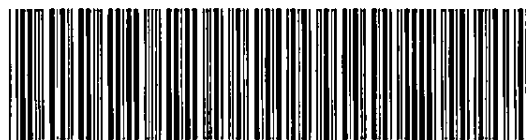
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE AFFAIRS

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FILED

D. SIMMONS

SEP - 7 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOSSKI GROUP 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:

BRIAN MOSS

Name of Person

MOSSKI GROUP LLC

Firm/Company

12011 BRAMBLE COVE DRIVE

Address

FORT MYERS, FL 33905

City/State and Zip Code

MOSS282@YAHOO.COM

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

For further information concerning this matter, please call:

BRIAN MOSS

239 851-1982
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Page 1 of 3

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	FRANK S PILARSKI III	2121 FAIRMONT LANE	<input type="checkbox"/> Add
		NAPLES, FL 34120	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID HILL	9976 SPRING GULCH LANE	<input checked="" type="checkbox"/> Add
		PUNTA GORDA, FL 33950	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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DIVISION OF RECORDS

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DIVISION OF CONSERVATION

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DIVISION OF CORRECTIONS

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.

(b) The 90th day after the record is filed.

Dated AUGUST 28

2017

[Handwritten signature]

Signature of a member or authorized representative of a member

BRIAN MOSS, MGR

Typed or printed name of signee