

L17000075320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

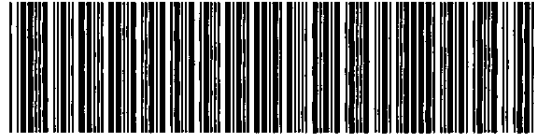
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
17 MAY 22 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 22 2017

J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MA-HUB, 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:

Teresa Bell

Name of Person

Veil Legal

Firm/Company

10421 South Jordan Gateway, Ste 600

Address

South Jordan, UT 84095

City/State and Zip Code

tbell@veillegal.com

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

For further information concerning this matter, please call:

Teresa Bell

Name of Person

at (**877**) **313-1043 x1**

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

MA-HUB, LLC

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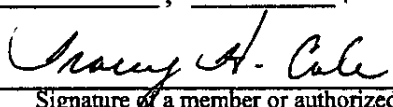
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Tracey H Cole	7040 N Highway 1 Apt 106 Cocoa, FL 32927 US	☐ Add ☒ Remove
AMBR	Willard C Cole	7040 N Highway 1 Apt 106 Cocoa, FL 32927 US	☐ Add ☒ Remove
AMBR	LeLu Investments, LLC	7040 N Highway 1 Apt 106 Cocoa, FL 32927 US	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

Dated _____



Signature of a member or authorized representative of a member

Tracey Cole

Typed or printed name of signee

FILED
MAY 22 AM 7:12
CLERK OF CIRCUIT COURT
JANET A. SEC. FLORIDA