

L17000 103726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

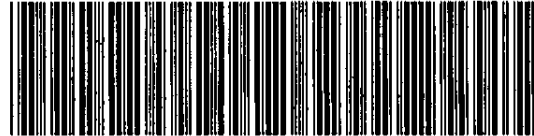
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 27 2018
J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Get Liquid Funding 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:

Jamie DaCosta

Name of Person

Get Liquid Funding LLC

Firm/Company

2300 Palm Beach Lakes Blvd suite #311

Address

West Palm Beach, FL 33409

City/State and Zip Code

Jaime.dacosta@yahoo.com

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

For further information concerning this matter, please call:

Jaime DaCosta

561 722-6539
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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>
AMBR	Kevin A Horn	2300 Palm Beach Lakes Blvd	☐ Add
		Suite # 311	☐ Remove
		West Palm Beach, FL 33409	☒ Change
AMBR	Jaime A DaCosta	2300 Palm Beach Lakes Blvd	☐ Add
		Suite # 311	☐ Remove
		West Palm Beach, FL 33409	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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TALLAHASSEE, FLORIDA

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 03/22/18 March 22nd, 2018

Signature of a member or authorized representative

Janine A DaCosta
Typed or printed name of signee