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PICK-UP WAIT	MAIL
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(Document Number)	
Certified Copies Certificates of State	tus
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Registration S Division of Co			
PANCHIC SUBJECT:	KEN LLC		
300917,1.	Name of Lin	nited Liability Company	<del></del>
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	SHIRLEY BRYCE		
		Name of Person	
	PANCHICKEN LLC		
		Firm/Company	
	11150 ОКЕЕСНОВЕЕ ВО	DULEVARD, SUITE H	
		Address	<del></del>
	ROYAL PALM BEACH,	FL 33411	
	panchickenbarandgrill@yal	City/State and Zip Code	
		to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please ca	all:	
SHIRLEY BRYCE		561 693-7278	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		(J)
□ \$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 If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SHIRLEY BRYCE	136 GRANADA STREET	
		ROYAL PALM BEACH, FL 3341 \(\bar{\chi}\)	☐ Remove
			<b>∃</b> Change
MGR	AKEEM ARNOLD	136 GRANADA STREET	<b>□</b> Add
		ROYAL PALM BEACH, FL 3341 (	Remove
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record specifies he 90th day afto	a delayed effec er the record is	ctive date, b filed.	out not an ef	fective time,	at 12:01 a.m	. on the earlier
ed OCTOBER 10		. 2017	·			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00