

L17000127436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

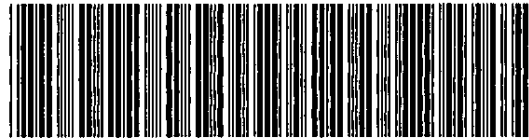
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

JUN 20 2017  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Alacrity Business Service 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:

Kristalee R Suer

\_\_\_\_\_  
Name of Person

Alacrity Business Service LLC

\_\_\_\_\_  
Firm/Company

2866 NW 55th Ave 2C

\_\_\_\_\_  
Address

Lauderhill Fl 33313

\_\_\_\_\_  
City/State and Zip Code

alacrity.consults@gmail.com

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

For further information concerning this matter, please call:

Kristalee R Suer

561 222-3061  
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

## 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>
PRES	Kristalee Suer	2866 NW 55th Ave 2C	<input checked="" type="checkbox"/> Add
		Lauderhill, FL 33313	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christopher Watler	1990 Jackson Street Apt 108	<input checked="" type="checkbox"/> Add
		Hollywood, Fl 33020	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Shivani Moore	2122 Kilimanjaro Court	<input checked="" type="checkbox"/> Add
		Apopka, Fl 32712	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

06/10/2017

**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 06/12/2017 \_\_\_\_\_,

Kristalce R. Suer

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