

L17000137616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

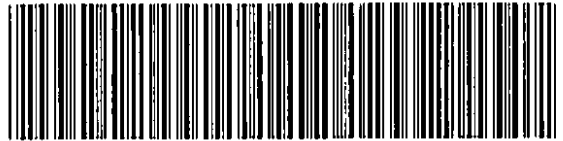
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

\$?

Office Use Only



800314926328

07/10/18--01003--012 **20.00

05/11/18--01014--011 **5.00

FILED
18 SEP -4 AM 2:30
SECURITIES AND INVESTMENTS
TALLAHASSEE, FLORIDA

K. SALY
SEP 11 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2018

MAURICE MCGANN
5727 GARFIELD ST.
HOLLYWOOD, FL 33021

SUBJECT: PYREX SOUNDS LLC
Ref. Number: L17000137616

We have received your document for PYREX SOUNDS LLC and check(s) totaling \$20.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 418A00015098

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pyrex Sounds 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:

Maurice McGann

Name of Person

Firm/Company

5727 Garfield Street

Address

Hollywood, FL 33021

City/State and Zip Code

Reese.Bluehouse@gmail.com

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

For further information concerning this matter, please call:

Maurice McGann

Name of Person

at (305) 542-6896
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

2008 SEP -4 PM 3:03

RECEIVED

remaining payment
check # 1193 in
amount of \$20.00
was insufficient

Name Change

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18 SEP -4 AM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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18 SEP -4 AM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated June 25, 2018.

Maurice McGann

Signature of a member or authorized representative of a member

Maurice McGann

Typed or printed name of signee