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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

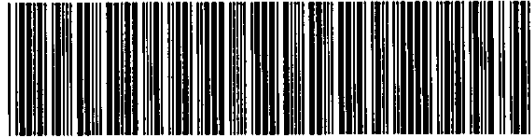
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2018 APR -9 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 10 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE LOVE PAC 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:

William SOLTNER
Name of Person

THE LOVE PAC LLC
Firm/Company

624 NORTH C STREET
Address

LAKE WORTH FL. 33460
City/State and Zip Code

THELOVEFORPAC@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William SOLTNER at (561) 370 8334
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

THE LOVE PAC LLC

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>
MGR	William SOLTNER	624 N. C. ST	<input checked="" type="checkbox"/> Add
		LAKE WORTH	<input type="checkbox"/> Remove
		FL. 33460	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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)

Dated 4.4.2018, 2018

Katanga Götter
Signature of a member or authorized representative of a member

sutanya Soltner
Typed or printed name of signee

Filing Fee: \$25.00

FILED
2010 APR -9 AM 10:23
CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA