

L17000157795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

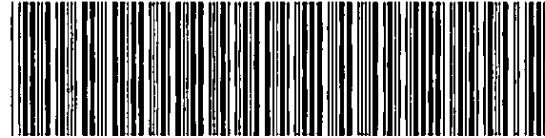
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FL

10/11/20

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Small b2b Solutions

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:

Robert Calhoun

Name of Person

Small b2b Solutions

Firm/Company

11523 sw 53 pl

Address

Cooper City, FL 33330

City/State and Zip Code

Robert@smallb2b.com

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

For further information concerning this matter, please call:

Robert Calhuon

786

228-9926

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

If Changing Registered Agent, Signature of New Registered Agent

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	Maikel Alfonso	11523 sw 53 pl	<input checked="" type="checkbox"/> Add
		Cooper City, FL 33330	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2020 OCT 14 PM 4:04
CLERK OF DISTRICT COURT
FLORIDA
STATE
JUDGE
JAMES L. HARRIS
CLERK OF DISTRICT COURT
FLORIDA

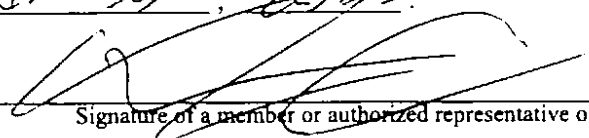
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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2020 OCT -5 PM 4:05
DEPT. OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 9/30/20 (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 September 30, 2020



Signature of a member or authorized representative of a member

Robert Calhoun

Typed or printed name of signee