

217000160217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

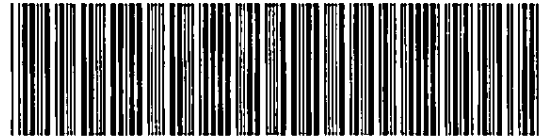
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 JAN 29 P 11:35

FILED IN SUBJECT 01016

D. SCOTT
JAN 30 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2018

PATRICIA MARIN
620 LUISA CT UNIT 3
NAPLES, FL 34104

SUBJECT: ROSIE'S ALTERATIONS LLC
Ref. Number: L17000160217

We have received your document for ROSIE'S ALTERATIONS LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 718A00000633

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RECEIVED

JAN 29 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROSIE'S ALTERNATIONS 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:

PATRICIA MARIN

Name of Person

ACCOUNTING SERVICES PM CORP

Firm/Company

620 LUISA CT UNIT 3

Address

NAPLES, FL 34104

City/State and Zip Code

patrymarin@hotmail.com

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

For further information concerning this matter, please call:

PATRICIA MARIN

Name of Person

786

at ()

Area Code

312-3764

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input 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

FILED
TALLAHASSEE, FL 32301
2019 JAN 29 PM 4:36

FILED

ROSIE'S ALTERATIONS LLC

The Articles of Organization for this Limited Liability Company were filed on 08/01/2017 and assigned Florida document number L17000160217

ROBERSON'S ALTERATIONS & TAILOR LLC

1000 INMOKALEE RD STE 82

NAPLES, FL 34110

1000 IMMOKALEE RD STE 82

NAPLES , FL 34110

Enter Florida street address

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>
VP	JONATHAN ROBERSON	1000 IMMOKALEE RD SUITE 1	<input checked="" type="checkbox"/> Add
		NAPLES, FL 34110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE FL 32304

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SECY OF STATE
TALLAHASSEE, FLORIDA

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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 JANUARY 02 2018

Elba Rocio Rabenstein

Signature of a member or authorized representative of a member

ELBA R ROBERSON

Typed or printed name of signee