

L17 000169134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

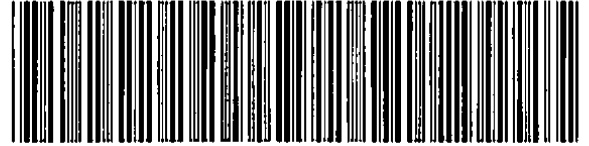
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/19/19--01026--007 **30.00

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2019 AUG 19 P 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 29 2019
T. LEMMEUX

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vitis Finance 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:

Fred Bertron

Name of Person

Thomas James Investments LLC

Firm/Company

3225 S. MacDill Ave.
Ste. 129-197

Address

Tampa, FL 33629

City/State and Zip Code

bertron@me.com

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

For further information concerning this matter, please call:

Fred Bertron

952

956-2226

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

FILED

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 201

2019 AUG 19 P 02 45

~~SECRETARY OF STATE~~
~~TALLAHASSEE, FLORIDA~~

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
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Change

[illegible]

(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)

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.

F. Bertus
Signature of a member or authorized representative of a member

Typed or printed name of signee