

LI7000205571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

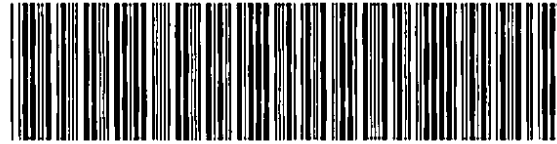
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DIVISION OF REVENUE

O. SIMMONS

OCT 20 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ILASH OBSESSION 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:

Dominique Rainey
Name of Person

ILASH OBSESSION
Firm/Company

1760 N. East Ave, B3
Address

SARASOTA, FL 34234
City/State and Zip Code

ilashobsession@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominique Rainey at (941) 249-1240
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

☐ \$60.00 Filing Fee,
Certificate of Status &

ILASH OBSESSION 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	Dominique Rainey	4410 4th Ave S. St. Petersburg, FL 33711	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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ST. PETERSBURG, FL
COUNTY CLERK'S OFFICE

17 OCT 19 11 11
DIVISION

17 OCT 19 PM 1:53
DIVISION

FILED

(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:

Dated _____, 20____

Signature of a member or authorized representative of a member

Typed or printed name of signee