

11/14/2017 12:28:07 PM
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Cincotta, Donna L. Foley & Lardner LLP Page 2

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FOLEY & LARDNER OF TAMPA
Account Number : 071344001620
Phone : (813)229-2300
Fax Number : (813)221-4210

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: enunes@perceptionir.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FJELL, LLC

Certificate of Status	0
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Corporate Filing Menu

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2017 NOV 14 PM 1:25

17 NOV 16 PM 6:49

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FJELL, 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:

Eric P. Nunes

Name of Person

Firm/Company

3919 Sorrel Vine Drive

Address

Wesley Chapel, FL 33544

City/State and Zip Code

enunes@perceptionir.com

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

For further information concerning this matter, please call:

Jamil G. Daoud, Esq.

802 225-4188
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

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	HEATHER NUNES	3919 Sorrel Vine Drive	<input checked="" type="checkbox"/> Add
		Wesley Chapel, FL 33544	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

117 NOV 14 PM 4:49

E. Effective date, if other than the date of filing: _____ (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)

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(b) The 90th day after the record is filed.

Dated November 14, 2017



Signature of a member or authorized representative of a member

Eric P. Nunes

Typed or printed name of signer