

L170000217459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

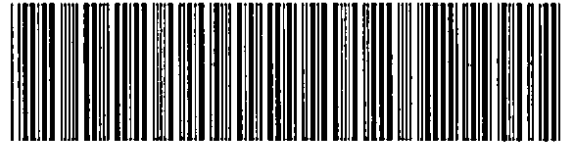
(Business Entity Name)

(Document Number)

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2019 MAY 22 AM 9:55  
ST. LOUIS, MO  
FBI

T GLASS

JUN 08 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UNITED EXECUTIVE PROTECTION SERVICES 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:

Carmen L. Silva

Name of Person

Scribe Accounting Services Inc

Firm/Company

3950 Southpointe Dr Unit 407

Address

Orlando, FL 32822-3796

City/State and Zip Code

scribeaccountingservices@live.com

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

For further information concerning this matter, please call:

Carmen L. Silva

Name of Person

321 594-0450  
at ( )

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

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## UNITED EXECUTIVE PROTECTION SERVICES 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	MARTITA ECHEVARRIA	5540 SILVER THISTLE LANE ST. CLOUD, FL. 34772	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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APPROVED  
AND  
FILED  
JAN 19 2022  
CLERK OF DISTRICT COURT  
NORTH DAKOTA

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

NO OTHER CHANGES

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2019 MAY 22 PM 9:55

MAY 17, 2019

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)

**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 MAY 17, 2019



Signature of a member or authorized representative of a member

FELIX ECHEVARRIA Jr.

Typed or printed name of signee