

L17000218867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

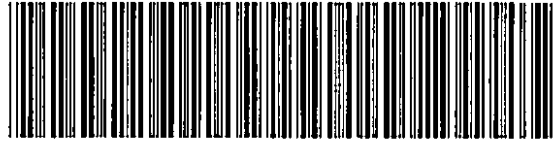
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2015-11-15 14:10:26

2015-11-15 14:10:26

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MTE Splicing 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:

Mickey Martin

Name of Person

MTE Splicing, LLC

Firm/Company

1040 Grant Blvd

Address

Lehigh Acres, FL 33974

City/State and Zip Code

mtesplicing@gmail.com

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

For further information concerning this matter, please call:

Mickey Martin

239

410-2158

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

2019 OCT 15 AM 10:26

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

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	Mickey Martin	1040 Grant Blvd	<input checked="" type="checkbox"/> Add
		Lehigh Acres, FL 33974	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tracy Martin	1040 Grant Blvd	<input type="checkbox"/> Add
		Lehigh Acres, FL 33974	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[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:

Dated 10.10.19

Tracy Martin
Signature

Signature of a member or authorized representative of a member

Tracy Martin

Typed or printed name of signee