

L17000247173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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EXAMINER

16 JUL 2018 18:24
16 JUL 2018 18:24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Haute Pynk 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:

Teresa Nichole Simmons
Name of Person

Blingwith a Twist
Firm/Company

2914 Alaskan Way
Address

Jacksonville FL 32226
City/State and Zip Code

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

For further information concerning this matter, please call:

Teresa Nichole at (904) 485-0797
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

18 JUL 56 08:24

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

Florida document number L17000247173

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

2914 Alaskan Way
Jacksonville FL 32226

(Mailing address MAY BE A POST OFFICE BOX)

Zip Code

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	Teresa Simmons	2914 Alaskan Way	<input checked="" type="checkbox"/> Add
		Jacksonville FL 32226	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
A MGR → AMBR	Alexis Lewey	2914 Alaskan Way	<input type="checkbox"/> Add
		Jacksonville FL 32226	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

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

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Teresa Simmons

Typed or printed name of signee