

L17000247 627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

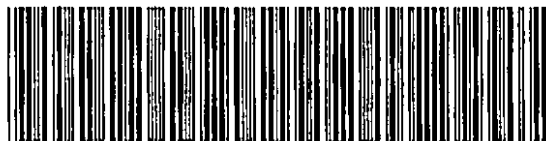
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 10 2018  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Correct Your Credit & Life 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:

Sidea Barkley  
Name of Person

Sparkling Credit Repair LLC  
Firm/Company

3076 Gladys Circle  
Address

Marionette 32446  
City/State and Zip Code

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

For further information concerning this matter, please call:

Sidea Barkley at (850) 486-6799  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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	Antonio Bellamy	3076 Gladys Circle	<input type="checkbox"/> Add
		Marianna FL 32446	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tithani Barclay	3076 Gladys Circle	<input checked="" type="checkbox"/> Add
		Marianna FL 32446	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Ambr	Tarrance Ellis	3076 Gladys Circle	<input checked="" type="checkbox"/> Add
		Marianna FL 32446	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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:

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

Dated January 3<sup>rd</sup> 2018

  
Signature of a member or authorized representative of a member

Sidea L Barkley  
Typed or printed name of signer

4311