

L180000/0452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

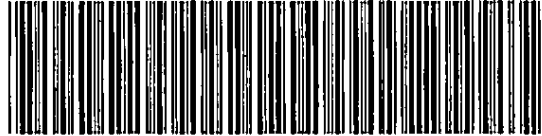
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓ SALY
APR 25 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Osteen Management 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:

Jennifer Osteen
Name of Person

Osteen Management LLC
Firm/Company

1435 NW 144th Drive
Address

Okeechobee FL 34972
City/State and Zip Code

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

For further information concerning this matter, please call:

Jennifer Osteen at (772) 240-6694
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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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TALLAHASSEE, FLORIDA

(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>
Pres	Kenneth L Osteen Jr	1435 NW 144 th Drive	<input type="checkbox"/> Add
		Okeechobee FL 34972	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Kenneth L Osteen	1435 NW 144 th Drive	<input type="checkbox"/> Add
		Okeechobee FL 34972	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Paula Osteen	1435 NW 144 th Drive	<input checked="" type="checkbox"/> Add
		Okeechobee FL 34972	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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FALL 2013

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

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18
CLERK OF DISTRICT COURT
STATE OF MINNESOTA

E. Effective date, if other than the date of filing: 3/1/18 (optional)
(If an effective date is listed, the document has a specific and cannot be subject to date of filing as more than 90 days after filing)

(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 March 20, 2018

Jennifer M. Oster
Signature of a member or authorized representative of a member

Jennifer M Osteen
Typed or printed name of signer