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DIVISION OF CORPORATIONS
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N COOPER
JUL 17 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MY NEW CITY 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:

VICTORIA TROINO

Name of Person

MY NEW CITY LLC

Firm/Company

27 POPE LANE

Address

PALM COAST, FLORIDA 32164

City/State and Zip Code

GTROINO@GMAIL.COM

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

For further information concerning this matter, please call:

VICTORIA TROINO

904

377-3114

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

MY NEW CITY LLC

The Articles of Organization for this Limited Liability Company were filed on 01/16/2018 and assigned
Florida document number L18000012446

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	LAUREL TROINO	27 POPE LANE	☐ Add
		PALM COAST, FLORIDA 32164	☒ Remove
			☐ Change
MGR	VICTORIA TROINO	27 POPE LANE	☒ Add
		PALM COAST, FLORIDA 32164	☐ Remove
			☐ Change
			☐ Add
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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)

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

Low Thrie
Signature of a member or authorized representative of a member

Typed or printed name of signee