

L18000018783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

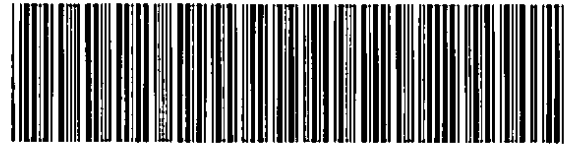
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/25/18 -01005--015 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
18 JAN 25 PM 2:02



407-926-4100
LAW FIRM WCLFIRM.COM



January 24, 2018

Via FedEx Overnight Delivery

Tracking #7713 1539 9268

Registration Section

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Re: Sun Squared LLC

Dear Sir/Madam:

Enclosed please find Articles of Amendment for immediate filing along our firm's check number 1994, in the amount of \$25.00 dollars made payable to "Florida Department of State" which represents the payment for the filing of the amendment. If you should have any questions or need additional information, please do not hesitate to contact our office.

Sincerely,

Nayda Escribano

Legal Assistant to

Glenn T. Williams, Esq., B.C.S.

Board Certified Specialist

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUN SQUARED 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:

FREDERICK WHITTEN

Name of Person

SUN SQUARED LLC

Firm/Company

221 ARBOR LAKES CIR

Address

SANFORD, FL 32771

City/State and Zip Code

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

For further information concerning this matter, please call:

GLENN WILLIAMS, ESQ.

407

926-4100

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

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TALLAHASSEE, FLORIDA
18 JAN 25 PM 2:02

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	FREDERICK WHITTEN	221 ARBOR LAKES CIR., SAN	<input checked="" type="checkbox"/> Add
		SANFORD, FL 32771	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FREDRICK ERICK	221 ARBOR LAKES CIRCLE, X	<input type="checkbox"/> Add
		SANFORD, FL 32771	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 JAN 25 PM 2:02

E. Effective date, if other than the date of filing: 01/22/2018 (optional)

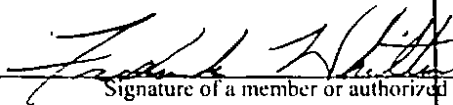
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 01/24/2018



Signature of a member or authorized representative of a member

FREDERICK WHITTEN, MGR

Typed or printed name of signee