

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000261202 3)))



H200002612023ABCP

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561) 694-8107
Fax Number : (561) 694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AMICON GREAT PATRIOT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Y SULKER
AUG 10 2020

****L20000154670 has now changed their name****



August 5, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AMICON GREAT PATRIOT, LLC
7430 N.E. 4TH COURT
MIAMI, FL 33138

SUBJECT: AMICON GREAT PATRIOT, LLC
REF: L18000034613

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L20000154670.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

FAX Aud. #: H20000261202
Letter Number: 420A00014703

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added, changed, or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of A</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remo
		_____	<input type="checkbox"/> Chang
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remo
		_____	<input type="checkbox"/> Chang
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remo
		_____	<input type="checkbox"/> Chan
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remo
		_____	<input type="checkbox"/> Chan
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remo
		_____	<input type="checkbox"/> Char
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Rem
		_____	<input type="checkbox"/> Chau

[illegible]

Effective date, if other than the date of filing: _____ (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 605.1

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 record is filed.

Typed or printed name of signee

Filing Fee: \$25.00