

L180000 39035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

O SIMMONS

2018-03-05

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ITAN II 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:

JOSEPH S LAFATA CPA

Name of Person

LAFATA CPA

Firm/Company

18952 N DALE MABRY HWY STE 101

Address

LUTZ FL 33548

City/State and Zip Code

RitaRose4@gmail.com

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

For further information concerning this matter, please call:

JOSEPH S LAFATA CPA

813 929-7779
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

ITAN II LLC

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	RITA PATEL	3552 SWANS LANDING DR	☒ Add
		LAND O LAKES, FL 34639	☐ Remove
			☐ Change
			☐ Add
			☐ 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)

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 FEBRUARY 26 2018

Aril Patel

Signature of a member or authorized representative of a member

ANIL PATEL

Typed or printed name of signee