

L18000078111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

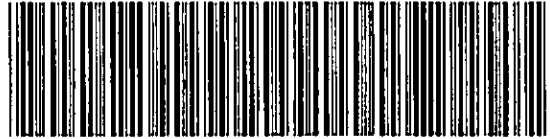
(Business Entity Name)

(Document Number)

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2021 JAN 21 PM 6:17  
SECRETARY OF STATE  
TALLAHASSEE, FL

3/4/21

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 4 ANGELS CONSTRUCTION & ROOFING, 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:

DIANA DAVIS BASTA, ESQ.

Name of Person

DAVIS BASTA LAW FIRM, P.A.

Firm/Company

31115 U.S. HIGHWAY 19 N

Address

PALM HARBOR, FL 34684

City/State and Zip Code

beskaly@yahoo.com

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

For further information concerning this matter, please call:

DIANA DAVIS BASTA

727 938-2255  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

**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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>  | <u>Address</u>            | <u>Type of Action</u>                      |
|--------------|--------------|---------------------------|--|
| P            | ENGY BESKALY | 3531 FORAY LANE           | <input type="checkbox"/> Add               |
|              |              | NEW PORT RICHEY, FL 34655 | <input checked="" type="checkbox"/> Remove |
|              |              |                           | <input type="checkbox"/> Change            |
| P            | ELIA BESKALY | 3531 FORAY LANE           | <input type="checkbox"/> Add               |
|              |              | NEW PORT RICHEY, FL 34655 | <input type="checkbox"/> Remove            |
|              |              |                           | <input checked="" type="checkbox"/> Change |
|              |              |                           | <input type="checkbox"/> Add               |
|              |              |                           | <input type="checkbox"/> Remove            |
|              |              |                           | <input type="checkbox"/> Change            |
|              |              |                           | <input type="checkbox"/> Add               |
|              |              |                           | <input type="checkbox"/> Remove            |
|              |              |                           | <input type="checkbox"/> Change            |
|              |              |                           | <input type="checkbox"/> Add               |
|              |              |                           | <input type="checkbox"/> Remove            |
|              |              |                           | <input type="checkbox"/> Change            |
|              |              |                           | <input type="checkbox"/> Add               |
|              |              |                           | <input type="checkbox"/> Remove            |
|              |              |                           | <input type="checkbox"/> Change            |

[illegible]

(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.

2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**