

LIB000085750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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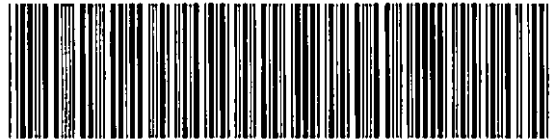
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STATE OF MISSISSIPPI  
DIVISION OF CORPORATION  
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OCT 03 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BOSS LADY PRODUCTIONS 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:

Maury Azerad, Esq.

\_\_\_\_\_  
Name of Person

Pike Law Firm, P.A.

\_\_\_\_\_  
Firm/Company

2716 Fruitville Rd.

\_\_\_\_\_  
Address

Sarasota, FL 34237

\_\_\_\_\_  
City/State and Zip Code

peter@pikerelaw.com

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

For further information concerning this matter, please call:

Maury Azerad, Esq.

941 312-2580

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



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	WINN, PAM		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MUSCAT, KYM		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Winn, Pamela		<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Muscat, Kymberly		<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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THE  
SECRETARY OF ARMY  
DIVISION OF CONSPIRACY

**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.

Dated September 25, 2018

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Maury Azerad, Esq.

Typed or printed name of signee