

L18000128352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

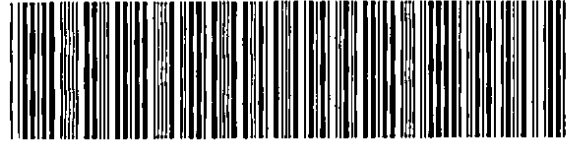
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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19 MAR -7 AM 8:11

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19 MAR -7 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS

MAR 07 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANITATION PRODUCTS, 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:

AJAY CHADHA
Name of Person

CONSOLIDATED CHEMICALS, LLC
Firm/Company

3191 WEST THARPE STREET
Address

TALLAHASSEE, FL 32303
City/State and Zip Code

ajay.chadha7@gmail.com
(E-mail) address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AJAY CHADHA at (850) 575-0921
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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

SANITATION PRODUCTS, LLC

CONSOLIDATED CHEMICALS, LLC

NOT APPLICABLE

NOT APPLICABLE

N/A

Nitro

Zip Code

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> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
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MAR 7 1982
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20535

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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MAR - 7 AM 8 25
19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. 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 605.0207 (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 3/7, 2011

Khadija

Signature of a member or authorized representative of a member

A-JAY C+(A-D+i)

Typed or printed name of signee