

**L18000227367**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

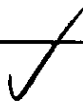
MAIL

\_\_\_\_\_  
(Business Entity Name)

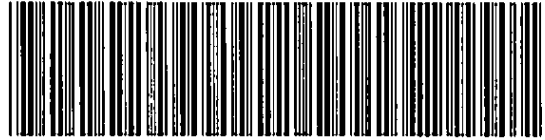
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(Document Number)

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2018 OCT 15 PM 11:39

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M. MILLIGAN

OCT 20 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Virtual Talk Solutions 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:

Celicia Peebles  
Name of Person

Firm/Company

2122 NW 7th Apt. 3  
Address

Ft. Lauderdale FL 33311  
City/State and Zip Code

CeliciaP86(a)Gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Celicia Peebles at (954) 793-3214  
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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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2018 OCT 15 PM 11:39  
SECRETARY OF STATE  
WASHINGTON, D.C. 20520

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

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>
owner/MGR	Celicia Peoples	2122 NW 75th Apt. 3 Fort Lauderdale FL 33311	<input checked="" 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
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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 10-5-2018, \_\_\_\_\_

Celicia Peoples  
Typed or printed name of signer

**Filing Fee: \$25.00**

2016 OCT 15 PM 11:35  
SECURITY OF OFFICE