

218000 232 776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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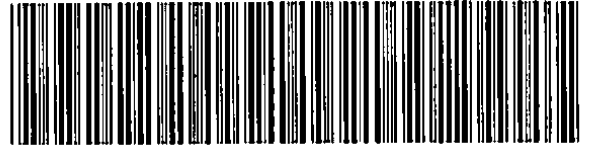
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BORLOSSE DEVOTED CARE, 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:

MARTHA SANON

Name of Person

BORLOSSE DEVOTED CARE, LLC

Firm/Company

1421 WEST 26TH STREET

Address

RIVERA, FL 33404

City/State and Zip Code

jaymarth03@gmail.com

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

For further information concerning this matter, please call:

MARTHA SANON

561 935-7453

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

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Zip Code
STATIONERY DEPT.
FALL AUSTIN, TEXAS

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	MARISE FRANCOIS	1421 WEST 26TH STREET	☐ Add
		RIVERA, FL 33404	☒ Remove
			☐ Change
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			☐ Add
			☐ Remove
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MAINTENANCE
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FBI - MEMPHIS

(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.

Dated 07-27/19 .

MARTHA SANON

Typed or printed name of signee