

L19000017846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

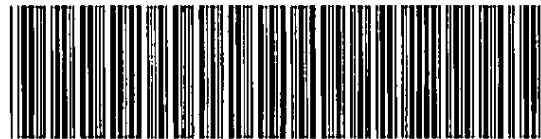
(Business Entity Name)

(Document Number)

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12/22/20  
[Signature]

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Anchored Projects, 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:

Elise Friedson

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

Anchored Projects, LLC

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

5694 Northpointe Lane

\_\_\_\_\_  
Address

Boynton Beach, FL 33437

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

connect@anchoredprojects.com

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

For further information concerning this matter, please call:

Elise Friedson

954 790-2163

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

**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>                      |
|--------------|-----------------|-------------------------|--|
| AMBR         | Elise Friedson  | 5694 Northpointe Lane   | <input type="checkbox"/> Add               |
|              |                 | Boynton Beach, FL 33437 | <input type="checkbox"/> Remove            |
|              |                 |                         | <input checked="" type="checkbox"/> Change |
| AMBR         | Jeffrey Bradley | 5694 Northpointe Lane   | <input type="checkbox"/> Add               |
|              |                 | Boynton Beach, FL 33437 | <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            |

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**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 November 12, 2020

Eino Friedson

Signature of a member or authorized representative of a member

Elise Friedson

Typed or printed name of signee

**Filing Fee: \$25.00**