

L19000 110 Q3E

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

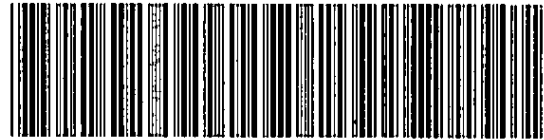
(Business Entity Name)

(Document Number)

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U.S. DISTRICT COURT
NORTH DAKOTA

O SIMMONS
JUN 03 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Da Shopping Hub 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:

Frank Seda

Name of Person

Da Shopping Hub LLC

Firm/Company

3822 Broadway Ave Unit C

Address

Fort Myers, FL 33901

City/State and Zip Code

fseda23@yahoo.com

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

For further information concerning this matter, please call:

Frank Seda

239

699-5745

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

Da Shopping Hub LLC

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>
VP	Juan C Romero	1500 Presidential Way	<input type="checkbox"/> Add
		West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Frank Seda	3822 Broadway Ave Unit C	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33901	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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(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 May 14, 2019

Frank Seda

Typed or printed name of signee