

L19000111300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

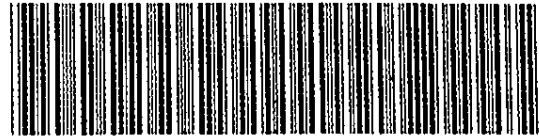
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/11/19--01006--091 \*\*25.00

2019 JUN 11

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Love & Light Legacy LLC

Name of Limited Liability Company

3

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melinda Afalava

Name of Person

Firm/Company

3553 Atlantic Ave A183

Address

Long Beach, CA 90807

City/State and Zip Code

loveandlightlegacy@gmail.com

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

For further information concerning this matter, please call:

Melinda Afalava

562

230-1584

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

TO  
OF  
OF

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

***(Principal office address MUST BE A STREET ADDRESS)***

**(Mailing address MAY BE A POST OFFICE BOX)**

Long Beach, CA 90807

Zip Code

Page 1 of 3

**If attending 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	Alan J Arakaki	4611 East 24th Ave., Tampa Florida 33605	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Reggie Canezo	4611 East 24th Ave., Tampa Florida 33605	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Richard Moses	4611 East 24th Ave., Tampa Florida 33605	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(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.

2019

*Melinda Palmer*  
Signature of a member or authorized

Signature of a member or authorized representative of a member

Typed or printed name of signee