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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

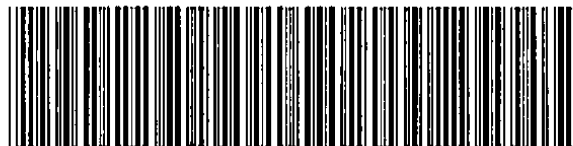
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/05/19--01027--022 **25.00

SECRETARY OF STATE
FILED
JUL -5 PM 4:48
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **CRIMINAL TASKFORCE ENFORCEMENT AGENCY 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:

REGGIE LEX DAVERMAN

Name of Person

CRIMINAL TASKFORCE L L C

Firm/Company

3557 JERICHO DR

Address

CASSELBERRY, FL 32707

City/State and Zip Code

CRIMINAL.TASKFORCE.AGENCY@GMAIL.COM

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

For further information concerning this matter, please call:

REGGIE LEX DAVERMAN

407

491-3894

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

FILED
JUL - 5
PM 4:42
TALLAHASSEE, FL
CLERK OF COURT

_____ and assigned

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

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> |
|--------------|-------------------------|-----------------------|---|
| MGR | OMAR SEDLEY REGIS FORDE | 3557 JERICO DR | <input checked="" type="checkbox"/> Add |
| | | CASSELBERRY, FL 32707 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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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.

[Signature]

REGGIE LEX DAVERMAN

Filing Fee: \$25.00