

L19000 131640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

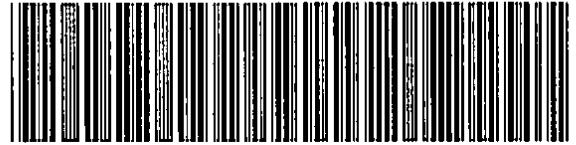
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300341174473

09 03 20-01457-037 4.25.00

S TALLENT  
MAR 23 2020

*Amend*

FILED  
2020 MAR -2 PM 4:34  
COURT CLERK  
CLERK

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EMIKO 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:

SCOTT KOIZUMI  
Name of Person

UDI  
Firm/Company

11225 ST JOHNS INDUSTRIAL PARKWAY N.  
Address

JACKSONVILLE, FL 32246  
City/State and Zip Code

SCOTTK@UDIWATER.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT KOIZUMI at (904) 421-2099  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

EMIKO LLC

**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

EIN 84-1873940

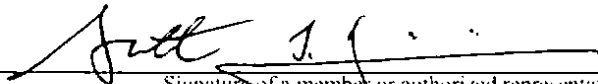
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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.

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.

Dated February 28, 2020



Signature of a member or authorized representative of a member

SCOTT KOIZUMI

Typed or printed name of signee

Filing Fee: \$25.00