

L19000220054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

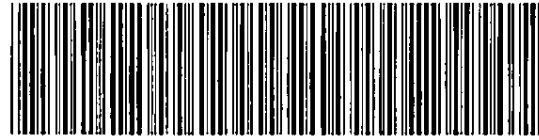
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRET

2022 MAR 29 PM 3:28

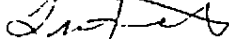
ALLAHASSEE, FL 00

2022 MAR 29 PM 4:24

RECEIVED

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: J20210000160 AMOUNT: \$25.00

AUTHORIZATION SIGNATURE: 

STALKER SMOKES, LLC L19000220054

(Business Name) Document

☐ Walk in ☐ Pick up time _____

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certified Copy of Articles of Incorporation

☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**

AMENDMENTS

☒ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger
☐ **Conversion**

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ APOSTIL() _____
Country

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement

☐ Other

EXAMINER'S INITIALS: _____

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☐ Walk in ☐ Pick up time ☐

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☐ **Certified Copy of Articles of Incorporation**

☐ **Certificate of Status**

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☐ Other

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STALKER SMOKES, 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:

Rochelle Friedman Walk

Name of Person

AEGIS Law

Firm/Company

1550 W Cleveland St

Address

Tampa FL 33606

City/State and Zip Code

lros@aegislaw.com

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

For further information concerning this matter, please call:

Rochelle Walk

813 999-0199
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>
MGR	STALKER SMOKES, INC	919 NORTH MARKET ST STE 950	<input type="checkbox"/> Add
		WILMINGTON, DE 19801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zest Brands, Inc	919 NORTH MARKET ST STE 950	<input checked="" type="checkbox"/> Add
		WILMINGTON, DE 19801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2021/11/22
11:00 AM
229

2002 MAR 28 AM 9:29
-CHANDLER-

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 March 29, 2022

in: [illegible] (Mar 29, 2017 10:29 EDT)

Inga Nasi

Filing Fee: \$25.00