

L19000271617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

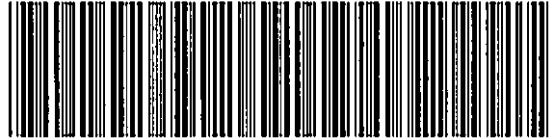
(Business Entity Name)

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T. A.
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011-50

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>
PRES/MC	AMY BRUCE	4615 NW 32ND TERRACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33993	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES/MC	KERRY ADAMS	7132 23RD STREET	<input type="checkbox"/> Add
		ZEPHYRHILLS, FL 33540	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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RECORDS SECTION
 01 OCT 19 9 10 18 AM '83
 11 11 11

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

Multiple horizontal lines for amending information.

2021 OCT -6 11:12:18
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: 10/01/2021 (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 OCTOBER 04 2021

Kerry Adams

Signature of a member or authorized representative of a member

KERRY ADAMS

Typed or printed name of signer