

L19000291431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

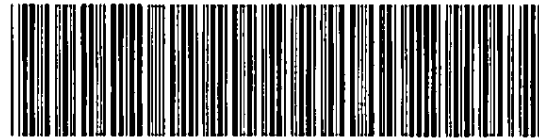
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

talk to Sonya on 4/16/20
add suffix

Office Use Only



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03/05/20--01014--011 **25.00

2020 APR 16 PM 2:10

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APR 16 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2020

SONYA PIERRE
516 NW 3RD ST
GAINESVILLE, FL 32601

SUBJECT: SONYA'S ROYALTY CLEANING SERVICE LLC
Ref. Number: L19000291431

We have received your document for SONYA'S ROYALTY CLEANING SERVICE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 620A00007662

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonya S Royalty Cleaning Service 2020 FEE - C. F. 10:55
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sonya Pierre
Name of Person

Sonya S Royalty Cleaning Service
Firm/Company

516 NW 3rd Street
Address

Gainesville FL 32601
City/State and Zip Code

sonya.pierre002@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sonya Pierre at (352) 441-6780
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

Sonya's Royalty Cleaning Service
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

NA
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>
NA			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CIVIL
CLERK

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

na

2020 APR 16 PM 2:10

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 3/27/2020

Sonya Pierre

Signature of a member or authorized representative of a member

Sonya Pierre

Typed or printed name of signer

Filing Fee: \$25.00