

L20000017361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

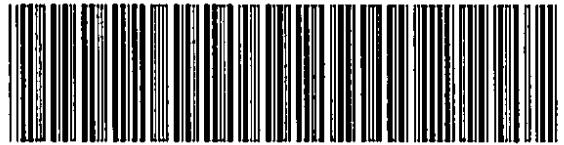
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/10/20--01016--001 **25.00

2020 10 10 PM 1:50

DATE

TIME

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Comfort Above & Beyond 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:

Oscar Caban

Name of Person

Comfort Above & Beyond LLC

Firm/Company

312 Partridge Pea Lane

Address

Doce, FL 34761

City/State and Zip Code

comfortabove@gmail.com

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

For further information concerning this matter, please call:

Oscar Caban

Name of Person

at (407)

Area Code

800-9912

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

[illegible]

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

~~am~~ Changing Oneill Pierre ~~RA~~ from "RA" to
"AMBR"

E. Effective date, if other than the date of filing: 01/24/2020 (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 _____, _____



Signature of a member or authorized representative of a member

Oscar Caban

Typed or printed name of signee