

L20 000056387

(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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2020 JUN 29 PM 5:51
SECRETARY OF STATE
TALLAHASSEE, FL

D. BRUCE
AUG 12 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: green apple marketplace, 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:

wayne farmer

Name of Person

green apple marketplace, llc

Firm/Company

17333 chelsea downs cir

Address

lithia, fl 33547

City/State and Zip Code

waynefarmer65@gmail.com

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

For further information concerning this matter, please call:

wayne farmer

901

212-5443

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

SECRETARY OF
TALLAHASSEE

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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>
ambr	wayne farmer	1733 chelsea downs circle	<input checked="" type="checkbox"/> Add
		lithia, fl 33547	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
mgr	wayne farmer	17333 chelsea downs cir	<input checked="" type="checkbox"/> Add
		lithia, fl 33547	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FL

(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)

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.


Signature of a member or authorized representative of a member

Typed or printed name of signee