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(Requestor's Name)

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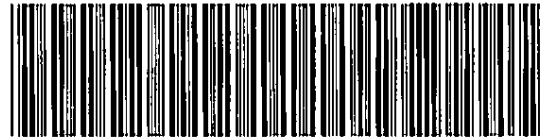
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TO: Registration Section
Division of Corporations

SUBJECT: Little Enterprises 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:

JAMEEL Little
Name of Person

Firm/Company

444 NW 18th Ave
Address

FORT LAUDERDALE, FL 33311
City/State and Zip Code

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

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For further information concerning this matter, please call:

JAMEEL Little at (954) 225-5118
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 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>
N/A	N/A	N/A	<input type="checkbox"/> Add
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Dated May 29th, 2020

Jameel Little
Signature of a member or author

JAMEEL Little

Typed or printed name of signee

Filing Fee: \$25.00