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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

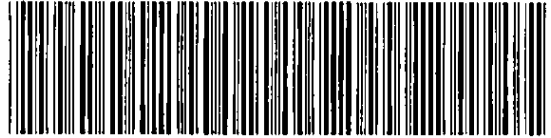
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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24 SEP 20 11:05

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Newob Group 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:

Kerry-Ann Holder
Name of Person
Newob Group LLC
Firm/Company
604 N. Highway 27
Address
Minneola FL 34715
City/State and Zip Code
Newobgroup11c@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kerry-Ann Holder at (347) 409-4115
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

Newob Group LLC

The Articles of Organization for this Limited Liability Company were filed on June 17, 2020 and assigned Florida document number L200000167808

Cherish Moments Decor LLC

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	Cherrie Bowen	9922 Lenox STREET	<input type="checkbox"/> Add
		Clermont FL 34711	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Ron Bowen	9922 Lenox STREET	<input type="checkbox"/> Add
		Clermont FL 34711	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Cherrish Theodore	9922 Lenox Street	<input type="checkbox"/> Add
		Clermont FL 34711	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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(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 of

Kerry-Ann Holder

Typed or printed name of signee

Filing Fee: \$25.00