

L20 0000 233 008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

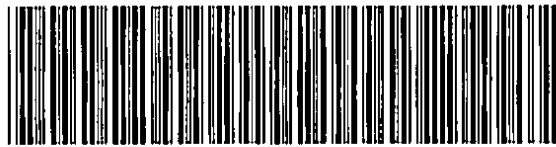
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Certified Copies _____

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09/14/20--01005--005 **25.00

09/14/20 14:00:00

OCT 24 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TUSCOZ, L.L.C.
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:

PAUL ARSLANIAN

Name of Person

TUSCOZ, LLC

Firm/Company

74 E. Long Lake Road, Suite 100

Address

Bloomfield Hills, Michigan 48304

City/State and Zip Code

paul@estateplans.com

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

For further information concerning this matter, please call:

Paul Arslanian	248	540-7500
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>
MGR	John Zessin	6029 N. Ocean Boulevard	<input type="checkbox"/> Add
		Ocean Ridge, Florida 33435	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Paul Arslanian	74 E. Long Lake Road	<input checked="" type="checkbox"/> Add
		Suite 100	<input type="checkbox"/> Remove
		Bloomfield Hills, Michigan 48304	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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18. 111-5

(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.

September 8 2020

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00