

K20 000265917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

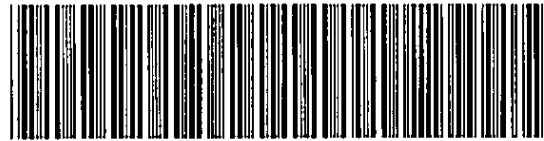
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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APR 12 2021

04/13/21--01014--004 **55.00

21 APR 12 AM 10:38
OFFICE OF THE CLERK
OF THE DISTRICT OF COLUMBIA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THAT'S HERSHEY STYLES 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:

LENORA R YOUNG

Name of Person

THAT'S HERSHEY STYLES LLC

Firm/Company

5032 ADAIR OAK DRIVE

Address

ORLANDO, FL 32929

City/State and Zip Code

young_lenora@yahoo.com

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

For further information concerning this matter, please call:

LENORA R YOUNG

407

6005015

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

ON 13-11-2014
 13-11-2014

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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

FLORIDA
DIVISION OF
CORRECTIONS

<u>Title</u>	<u>Name</u>	<u>Address</u>	21 APR 12 AM 10:38	<u>Type of Action</u>
MGR	LENORA R YOUNG	5032 ADAIR OAK DRIVE		<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32829		<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
				<input type="checkbox"/> Add
				<input type="checkbox"/> Remove
				<input type="checkbox"/> Change
				<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

21 APR 12 AH10: 38

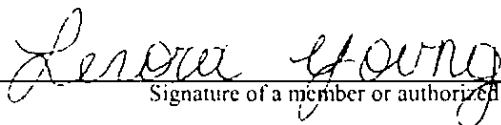
E. Effective date, if other than the date of filing: _____ (optional)

(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 April 07, 2021



Signature of a member or authorized representative of a member

Lenora Young

Typed or printed name of signee