

120 000294 001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

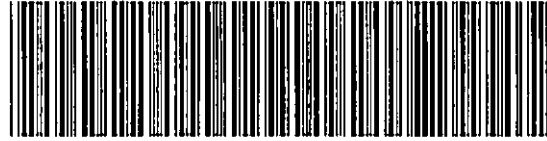
Special Instructions to Filing Officer:

J DENNIS

JAN - 5 2023

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2022 OCT 11 PM 4:53

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KING OF LANES 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:

LOUIS JAMES

Name of Person

KING OF LANES LLC

Firm/Company

511 FIELD STREAM BLVD

Address

ORLANDO, FL 32825

City/State and Zip Code

LSTYLES407@GMAIL.COM

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

For further information concerning this matter, please call:

LOUIS JAMES

at ( 407 ) 489-5037  
Area Code Daytime Telephone Number

Name of Person

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

## KING OF LANES 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>
MGR	STEVE MARTIN	981 DEKLEVA WAVY LEAF CT	<input type="checkbox"/> Add
		APOPKA , FL 32712	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARIANA JAMES	511 FIELD STREAM BLVD	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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