

L21 0000 73318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

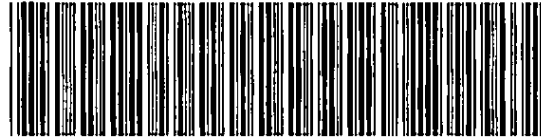
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JULIA MOSSE, FL

2022 MAR 31 PM 2:41

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Y. SCOTT

APR 16 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stuart Thorn 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:

Stuart Thorn

Name of Person

Firm/Company

1145 NE 5th Ave

Address

Boca Raton FL 33432

City/State and Zip Code

st@sts.best

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

For further information concerning this matter, please call:

Stuart Thorn 561 267 3404
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FL

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<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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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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2022 MAR 27 PM 4:41
CLERK OF DISTRICT COURT
JACKSONVILLE, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

BUSINESS PURPOSE CHANGE TO

TO GENERALLY CONDUCT TRADE, BUY, SELL, AS PRINCIPAL OR AGENT,

ANY GOODS OR SERVICES THAT IS LEGAL TO DO SO.

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DEPT. OF STATE

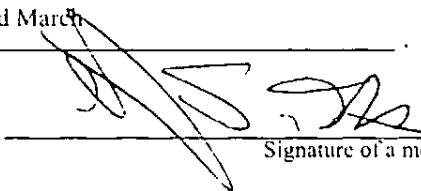
E. Effective date, if other than the date of filing: 23rd March 2022 **(optional)**

(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 23rd March 2022



Signature of a member or authorized representative of a member

Stuart Thorn

Typed or printed name of signee