

7/19/2021

L21000119022

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JACKED PANDA PREP TO GO, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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A. LUNT

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TALLAHASSEE, FLORIDA

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Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JACKED PANDA PREP TO GO, 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th Fl

Address

Glendale, CA 91203

City/State and Zip Code

jcohouser@gmail.com

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

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For further information concerning this matter, please call:

Cheyenne Moseley

800

773-0888

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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	NASH BROWN		<input type="checkbox"/> Add
		5210 FL- 64 BRADENTON, FL 34208	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	WILLIAM BROWN		<input type="checkbox"/> Add
		4055 WAYFARER WAY PALMETTO, FL 34221	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kim R Houser	11704 Meadowgate Place Bradenton, Florida 34211	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jeffrey C Houser		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		11704 Meadowgate Place Bradenton, Florida 34211	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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APR 3: 33

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

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 07 / 08 / 2021

Signature of a member or authorized representative of a member

Jeffrey C Houser

Typed or printed name of signer