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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

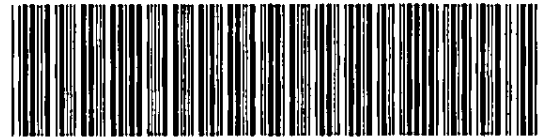
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/16/21--01014--017 **25.00

1/2/21

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Clear Round Management 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:

Kathryn L. Abrahamson

Name of Person

Firm/Company

8060 West Highway 326

Address

Ocala, FL 34482

City/State and Zip Code

kadylabra@icloud.com

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

For further information concerning this matter, please call:

Robert F. Croskery

813 244-5580
at () _____
Area Code Daytime Telephone Number

Name of Person

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

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> |
|--------------|-----------------------|-----------------------|--|
| AR | Kathryn L. Abrahamson | 8060 West Highway 326 | <input type="checkbox"/> Add |
| | | Ocala, FL 34482 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Kathryn L. Abrahamson | 8060 West Highway 326 | <input checked="" type="checkbox"/> Add |
| | | Ocala, FL 34482 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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[illegible]

(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.

Robert F. Crilly
Signature of a member or authorized representative of a member

Attorney for Clear River Marketing Management and
Typed or printed name of signee Monica Roddy Abrahamson

Filing Fee: \$25.00