

h21000159191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

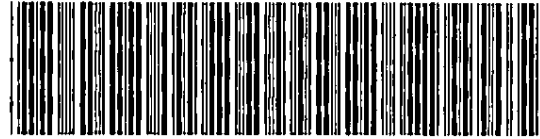
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Emily Kinzer 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:

Emily Crews
Name of Person

Emily Kinzer LLC
Firm/Company

4728 Sabal Key Drive
Address

Bradenton, FL 34203
City/State and Zip Code

emily@anchoredinmedia.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Crews at (941) 402-2607
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

100-443887

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RECEIVED

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Anchored in Media LLC

Emily Crews (married - update from Kinzer)

Enter Florida street address

_____, Florida _____
City Zip Code

Emily Cross
Changing Registered Agent, §

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

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(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)

Emily Crews
Typed or printed name of signee