

L21 000 173538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

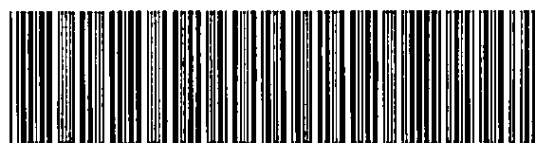
(Business Entity Name)

(Document Number)

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2021 APR 23 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

51 5/7/21

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**FILED**

**2021 APR 23 PM 12:13**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**SUBJECT: GLADES MADISON 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:

JOSEPH C. WASCH  
Name of Person

WASCH RAINES LLP  
Firm/Company

2500 N. MILITARY TRAIL, SUITE 303  
Address

BOCA RATON, FLORIDA 33431  
City/State and Zip Code

JWASCH@WASCHRAINES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH C. WASCH at ( 561 ) 693-3231  
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



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
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