

h21 000324787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

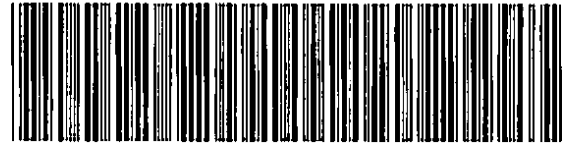
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FL

Y. SCOTT

DEC 12 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Boges Family Investments 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:

Filing Angela

\_\_\_\_\_  
Name of Person

ZenBusiness, Inc.

\_\_\_\_\_  
Firm/Company

5511 Parkerest Drive, Suite 103

\_\_\_\_\_  
Address

Austin, TX 78731

\_\_\_\_\_  
City/State and Zip Code

fulfillment@zenbusiness.com

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

Filing Angela

844

493-6249

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         | Eutemia Terrell Boges JR     |  | <input type="checkbox"/> Add               |
|              |                              |  | <input type="checkbox"/> Remove            |
|              |                              | 1420 Celery Palm Cove<br>Sanford, FL 32771 | <input checked="" type="checkbox"/> Change |
| AMBR         | Natasha Shunta Sturkie Boges |  | <input type="checkbox"/> Add               |
|              |                              |  | <input type="checkbox"/> Remove            |
|              |                              | 1420 Celery Palm Cove<br>Sanford, FL 32771 | <input 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            |
|              |                              |  | <input type="checkbox"/> Add               |
|              |                              |  | <input type="checkbox"/> Remove            |
|              |                              |  | <input type="checkbox"/> Change            |

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