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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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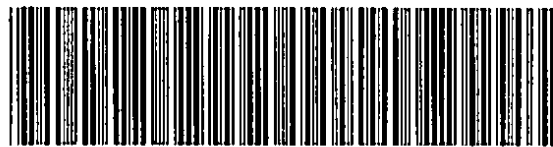
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C. BRUMBLEY
JAN - 4 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Florida Capital, 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:

Gary I. Handin

Name of Person

Law Offices of Gary I. Handin, P.A.

Firm/Company

3111 University Drive -Suite 605

Address

Coral Springs, Florida 33065

City/State and Zip Code

TBaker8201@gmail.com

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

For further information concerning this matter, please call:

Gary I. Handin

954 796-9600
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member


[illegible]

[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) **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.

Dated December 16, 2021

December 16, 2021



Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00