

L21000380974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 661 PALM 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:

Brian Sawyer

Name of Person

661 PALM LLC

Firm/Company

1680 HWY A1A, STE 3

Address

SATELLITE BEACH FL 32937

City/State and Zip Code

DBLSPROPERTIES@GMAIL.COM

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

For further information concerning this matter, please call:

Brian Sawyer

at 877 344-3257
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

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FILED

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2021 DEC 11

2020 DEC -1 PM 3:03
 Pursuant to 605.0207 (3)
 will not be listed as the

Dated 11/23/2023, RLV.

Brian Sawyer

Typed or printed name of signee