

h21 000391271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

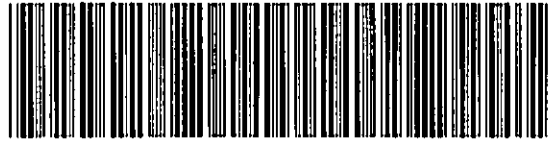
(Document Number)

Certified Copies _____ Certificates of Status _____

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21 OCT -7 PM 12:07



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 29, 2021

VANESSA CERPAS
10985 SW 107TH ST APT 208
MIAMI, FL 33176

SUBJECT: FAITHFUL PRODUCTIONS LLC
Ref. Number: L21000391271

We have received your document for FAITHFUL PRODUCTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews
OPS

Letter Number: 821A00023577

TO: Registration Section
Division of Corporations

SUBJECT: Faithful Productions 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:

Vanessa Cerpas

Name of Person

Faithful Productions LLC

Firm/Company

10985 SW 107th Street Apt. 208

Address

Miami, FL 33176

City/State and Zip Code

faithfulproductionsllc@gmail.com

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

For further information concerning this matter, please call:

Vanessa Cerpas

786

499-5993

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

21 OCT -7 PM 12:07

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

21 OCT -7 PM 12: 07

E. Effective date, if other than the date of filing: _____ (optional)

(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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October, 07

2021

Signature of a member or authorized representative of a member

Vanessa Cerpas

Typed or printed name of signee

Filing Fee: \$25.00