

L220000001738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

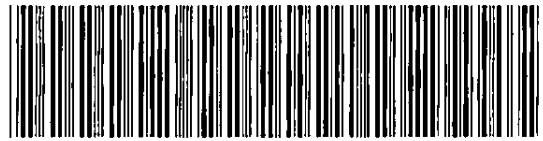
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Arterra Luxe - Florida, 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:

Lynn Hebert

Name of Person

Arterra Luxe - Florida, LLC

Firm/Company

429 S. Main St.

Address

Rochester, MI 48307

City/State and Zip Code

lynn.hebert@arterrarealty.com

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

For further information concerning this matter, please call:

Lynn Hebert

248

212-0210

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

If Changing Registered Agent, Signature of New Registered Agent

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>
MGR	Angela Yungk Belcher	8288 Blue Cypress Dr. Lake Worth, FL 33467	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Matthew Derocher		<input type="checkbox"/> Add
		4147 Westhill Dr. Howell, MI 48843	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	George Shaheen		<input type="checkbox"/> Add
		425 S Main St Ste 101 Rochester, MI 48307	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Brian Szliter		<input type="checkbox"/> Add
		425 S Main St Ste 101 Rochester, MI 48307	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[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.

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 September 19, 2024.

Thymus Helbert
Signature

Signature of a member or authorized representative of a member

Lynn Hebert

Typed or printed name of signer