

L32000030104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

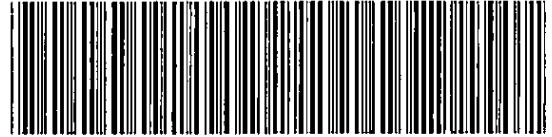
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/26/23--01007--016 **25.00

7/20/23
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2023 MAY 26 PM 3:05
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eclat Drinks 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:

Theophilus Freeman
Name of Person

Firm/Company

1310 Middle Street, #302
Address

Ft. Lauderdale, FL 33312
City/State and Zip Code

msamcoates@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theophilus Freeman at (954) 628-6002
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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

Eclat Drinks LLC

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 Coates | 800 NW 210 street | <input type="checkbox"/> Add |
| | | Miami Gardens, FL 33149 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Dawn Ferguson | 2721 Mayo Street | <input checked="" type="checkbox"/> Add |
| | | Hollywood, FL 33020 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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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)

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 May 19, 2023

Signature of a

Signature of a member or authorized representative of a member

Theophilus Freeman
Typed or printed name of signer

Typed or printed name of signee

Filing Fee: \$25.00