

620000013687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

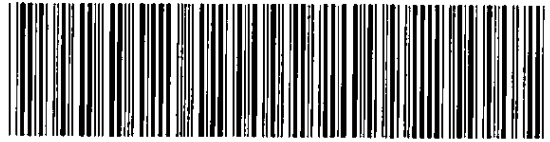
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

FILED

08/20/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ignited Services, 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:

Jennifer Smoot

Name of Person

Ignited Services, LLC

Firm/Company

21 S. Anchors Lake Drive

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

jensmoot21@gmail.com

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

RECEIVED
TALLAHASSEE, FL
JAN 20 PM 4:25

For further information concerning this matter, please call:

Mitch Smoot

618 969-0406
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

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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2017-03-30 PM 4:25
CLERK OF STATE
TALLAHASSEE, FL

2007-02-10 PM 4:25
STREET STATE
MISSISSIPPI

6/20/2010 PM 4:25
SERVICE STATION
WASHINGTON, DC

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 August 12 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00