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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2022 AUG 22 PM 12:56

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12:56 PM



# zenbusiness

Aug 12, 2022

Florida Secretary of State  
Division of Corporations  
2415 N Monroe St Suite 810  
Tallahassee, FL 32303

RE: Clanhope International LLC

To Whom It May Concern:

Attached please find the executed **ARTICLES OF AMENDMENT** for the above referenced.  
Please review and file the attached document on a routine basis. Please note that this document is signed with a conformed signature.

**PLEASE DO NOT INCLUDE THIS COVER PAGE IN THE FILING EVIDENCE.**

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc  
Attention: Jenny C.  
336 E. College Ave. Ste 301  
Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at [fulfillment@zenbusiness.com](mailto:fulfillment@zenbusiness.com).

Thank you.

Jenny C.  
ZenBusiness Customer Success

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Clanhope International 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:

Jenny C.  
Name of Person  
ZenBusiness Inc.  
Firm/Company  
336 E College Ave, Ste 301  
Address  
Tallahassee, FL 32301  
City/State and Zip Code  
fulfillment@zenbusiness.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jenny C. 844 493-6249  
Name of Person at ( ) 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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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>
AMBR	Thompson, Wayne, Roosevelt Clanhope	1130 Piedmont Avenue, NE	<input type="checkbox"/> Add
		1008	<input type="checkbox"/> Remove
		Atlanta, GA 30309	<input checked="" type="checkbox"/> Change
AMBR	Malcolm, Howard	15350 S.W. 143rd Street	<input checked="" type="checkbox"/> Add
		Miami, FL 33196-2878	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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