

h22000231389

(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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S. CHATHAM
OCT - 9 2022

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 15 PM 3:27

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ed Ink

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:

Shirley Edwards

Name of Person

Firm/Company

53 Evenshade Way

Address

St Augustine, FL 32092

City/State and Zip Code

camsam7375@aol.com

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

For further information concerning this matter, please call:

Shirley Edwards 904 3921773

Name of Person at () Daytime Telephone Number
Area Code

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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

Ed Ink, 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>
AMBR	Shirley Edwards	53 Evenshade Way	<input type="checkbox"/> Add
		St Augustine, FL 32092	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Ryan Edwards	53 Evenshade Way	<input type="checkbox"/> Add
		St Augustine, FL 32092	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE
DIVISION OF CONSPIRACIES
JUL 15 PM 5:17

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 15 PM 3:47

(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 07/07/ 2022


Signature of a member or authorized representative of a member

Shirley Edwards

Typed or printed name of signee