

L22000247480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

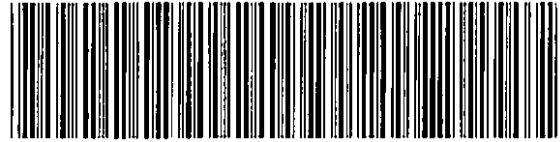
(Business Entity Name)

(Document Number)

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2023 NOV 17 PM 3:20

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAS TAX & PAYROLL SERVICES LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANH VU

\_\_\_\_\_  
Name of Person

MAS TAX & PAYROLL SERVICES LLC

\_\_\_\_\_  
Firm/Company

3248 W LAKE MARY BLVD, #1230

\_\_\_\_\_  
Address

LAKE MARY, FLORIDA 32746

\_\_\_\_\_  
City/State and Zip Code

ANHAVU@YAHOO.COM

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

ANH VU

407 221-5680

\_\_\_\_\_  
Name of Person

at ( )  
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

FILED  
DEC 17 2003  
TALLAHASSEE, FL

**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>
<u>D</u>	<u>Anh Vu</u>	<u>2970 Gipper circle</u>	<input type="checkbox"/> Add
		<u>Sanford, FL 32773</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>D</u>	<u>Anh Vu</u>	<u>3248 W lake Mary blvd</u>	<input checked="" type="checkbox"/> Add
		<u># 1230, lake Mary</u>	<input type="checkbox"/> Remove
		<u>Florida 32746</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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**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 NOVEMBER 13, 2023

Ann

Anh

**Filing Fee: \$25.00**