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LZZU0002794SS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

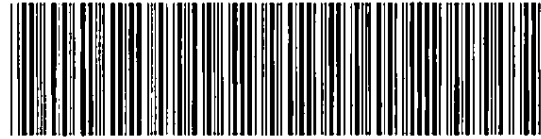
(Business Entity Name)

(Document Number)

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HARRISBURG, PA

COVER LETTER

**TO: Registration Section
Division of Corporations**

Costa Living Properties LLC

SUBJECT: _____
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:

Tracy Da Costa

Name of Person

Firm/Company

12368 Brady Road

Address

Jacksonville FL 32223

City/State and Zip Code

costalivingllc@outlook.com

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

For further information concerning this matter, please call:

Tracy Da Costa

904

382-1942

at ()

Name of Person

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

Costa Living LLC

The Articles of Organization for this Limited Liability Company were filed on June 21, 2022 and assigned
Florida document number 1.22000279455

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
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_____	_____	_____	☐ Add
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		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

D. If amending any other information, enter change(s) here: *Attach additional sheets if necessary*

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TREASURER
FL

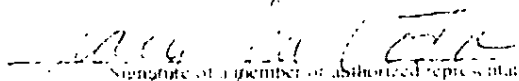
E. Effective date, if other than the date of filing: _____ (optional)

If an effective date is listed, the document is specific and cannot be prior to date of filing or more than 90 days after filing (information is reversed) under

Note: If the date inserted in the block does not meet the applicable statutory filing requirements, the date will not be listed as the document's effective date to the Department of State.

If the record specifies a delayed effective date, that means effective date at 12:01 p.m. on the day after the 90th day after the record is filed.

June 27, 2022
Dated: _____


Signature of a member or authorized representative of a member

Tracy DeCosta

Typed or printed name of filer

Filing Fee: \$25.00