

L22000293210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

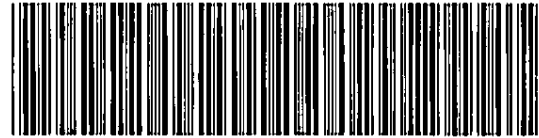
(Document Number)

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2022 JUL 11 AM 11:00
1-800-390-5533

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ascension Aerial Photography, 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:

Brian Anderson

Name of Person

Ascension Aerial Photography, LLC

Firm/Company

101 Markside Ave. Ste 404, Mailbox 163

Address

Ponte Vedra, FL. 32081

City/State and Zip Code

info@ascensionaerialphoto.com

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

For further information concerning this matter, please call:

Brian Anderson

904

351-6236

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

2007 JUL 11 PM 11:00

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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>
MGR	Lisa Anderson	225 Shadow Ridge Trl	<input type="checkbox"/> Add
		Ponte Vedra, FL. 32081	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brian Anderson	101 Marketside Ave	<input checked="" type="checkbox"/> Add
		Ste 404, Mailbox 163	<input type="checkbox"/> Remove
		Ponte Vedra, FL. 32081	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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 July 4 2022

Brian Wilson

Signature of a member or authorized representative of a member

Brian Anderson

Typed or printed name of signee