

L220000431112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

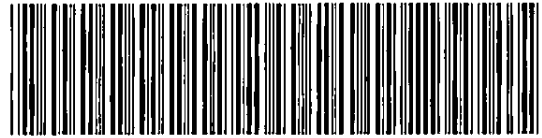
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400406835064

04/24/23--01030--013 **30.00

FILED
2023 APR 24 PM 1:13
CLERK OF SUPERIOR COURT
ESTATE

Y. SCOTT

JUN 11 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lighthouse Services 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:

Sumner Sheffield
Name of Person

Lighthouse Services LLC
Firm/Company

11282 SW 105th Ave
Address

Dunnellon FL 34432
City/State and Zip Code

LHservice.fl@gmail.com
E-mail address: (to be used for future annual report notification)

2023 APR 24 PM 1:13

FILED

For further information concerning this matter, please call:

Sumner Sheffield at (352) 426 9347
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

Lighthouse Services LLC
(Name of the Limited Liability Company as it now appears in the public records of the State of Maryland)

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	Sumner Sheffield	11282 SW 105 th Ave Dunnellon	<input type="checkbox"/> Add
		FL 34432	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Dakota Sheffield	11282 SW 105 th Ave	<input checked="" type="checkbox"/> Add
		Dunnellon FL 34432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 APR 24 PM 1:13
 RECEIVED
 FLORIDA STATE

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

AP - Sumner Sheffield - Add

11282 SW 105th Ave

Dunellon FL 34432

352 426 9347

FILED
2023 APR 24 PM 1:13
CLERK OF DISTRICT COURT
FLORIDA
JACKSONVILLE

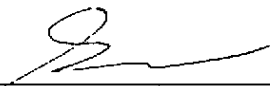
E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

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 April 19th, 2023



Signature of a member or authorized representative of a member

Sumner Sheffield

Typed or printed name of signee