

L23 0000 57843

(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



500402725075

02/27/23--01029--001 **30.00

FILED
2023 FEB 27 PM 1:11
CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

R. HUNT

02/27/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Ink Nolary 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:

Daniela Green
Name of Person

The Ink Nolary
Firm/Company

1225 W Wickham Rd Apt 324
Address

Melbourne FL 32935
City/State and Zip Code

daniela.green23@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniela Green at (786) 420-9127
Name of Person Area Code Daytime Telephone Number

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

RECEIVED
TALLAHASSEE, FL
JAN 13 2011
PM 1:11

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	Daniela Green	1225 W 12th Wickham Rd	<input type="checkbox"/> Add
		APT 324 Melbourne FL	<input type="checkbox"/> Remove
		32935	<input checked="" 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
			<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 FEB 27 PM 1:11
STATE OF FLORIDA
CLERK OF THE COURT

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

I just need to change my title from CEO to
manager for banking purposes.

I also need to add the EIN I got for the
company after filling the Articles of Incorpora-
tion. The EIN is the following: 92-2068336.

FILED
2023 FEB 27 PM 1:11
CLERK OF THE COURT
STATE OF FLORIDA

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

02 / 21

23

Signature of a member or authorized representative of a member

Daniela Green

Typed or printed name of signee