

L23000092579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

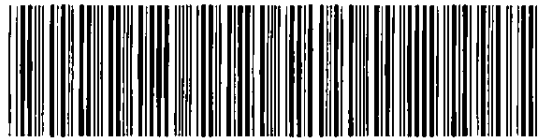
(Document Number)

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J. HORNE  
OCT 29 2024

Office Use Only



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10/07/24--01002--007 \*\*30.00

2024 OCT 29 13:13

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Danie Fashion Store  
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:

Rose Danielle Joseph  
Name of Person

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

14140 Arbor Pines DR  
Address

River View/FL 33579  
City/State and Zip Code

Trosedanielle@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rose Danielle Joseph at (656) 234-6863  
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

2024 OCT -7 11:10:18

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(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 September 23, 2024

*Rose Danielle Joseph*  
Signature of a member or authorized representative of a

Signature of a member or authorized representative of a member

ROSE DANIELLE JOSEPH

Typed or printed name of signee

**Filing Fee: \$25.00**