

L23000182908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

WAIT

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MAIL

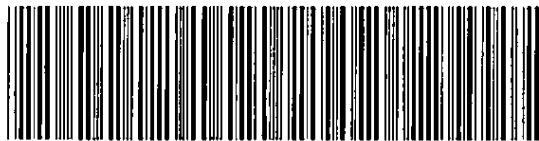
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/16/24--01028--008 **30.00

9/18/24
KLT

2024 SEP 16 PM 3:11

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Optimal Wellness St Pete, 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:

Kelley Lamb

Name of Person

Optimal Wellness St Pete LLC

Firm/Company

5041 Paloma Drive

Address

Tampa, FL 33624

City/State and Zip Code

kelleyannlamb@gmail.com

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

For further information concerning this matter, please call:

Kelley Lamb

813 401-0669

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

2015 JUN 15 PM 2:10

4-16 PM 3:10
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	Michelle Ham	622 SW 52nd Street	<input type="checkbox"/> Add
		Cape Coral, FL 33914	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[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)

Filing Fee: \$25.00