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(Requestor's Name)

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(City/State/Zip/Phone #)

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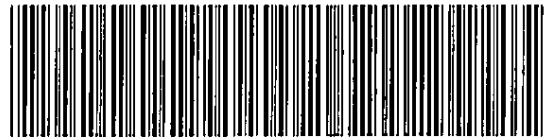
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 MAY 17 PM 5:52  
S. J. STE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cindi's Bookkeeping  
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:

Cynthia Clark  
Name of Person

Cindi's Bookkeeping  
Firm/Company

2603 Victoria Place  
Address

Crestview FL 32536  
City/State and Zip Code

Cindi32536@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindi Clark at (850) 830-7237  
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

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

\* Need to add my name  
Cynthia Y. Clark as Authorized  
to Manage LLC. Address  
provided is 2603 Victoria Place  
Crestview, FL 32536

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 5-10, 2023.

Cynthia Y. Clark  
Signature of a member or authorized representative of a member  
Cynthia Y. Clark  
Typed or printed name of signee



## Filing Information

Please review the filing for accuracy. If you need to make corrections, do so at this time. The filing information will be added/edited exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed, cancelled or refunded.

Effective date for this filing 05/01/2023

Certificate of Status Requested No

Certified Copy Requested No

Limited Liability Company Name CINDI'S BOOKKEEPING, LLC

### Principal Place of Business

Address 2603 VICTORIA PLACE

Suite, Apt. #, etc.

City, State CRESTVIEW, FL

Zip Code & Country 32536,

### Mailing Address

LIMITED LIABILITY COMPANY MAILING ADDRESS SAME AS PRINCIPAL ADDRESS.

### Name and Address of Registered Agent

Name (Last, First, Middle, Title) CLARK, CYNTHIA, Y,

Address 2603 VICTORIA PLACE

Suite, Apt. #, etc.

City, State CRESTVIEW, FL

Zip Code & Country 32536, US

Registered Agent Signature CYNTHIA Y CLARK

### Any Other Provision(s) - Optional (Purpose, Statements, etc.)

ACCOUNTING AND BOOKKEEPING

### Correspondence Name And E-mail Address

Name and e-mail address to whom correspondence should be e-mailed

Name CYNTHIA Y CLARK

E-mail Address CINDI32536@GMAIL.COM

### Signature of a member or an authorized representative.

Signature CYNTHIA Y CLARK

### Name And Address of Person(s) Authorized to Manage LLC

No Person Authorized to Manage LLC name and address provided.