

L23000343707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

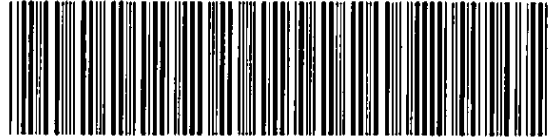
(Business Entity Name)

(Document Number)

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08/08/23--01012--017 **25.00

2023 AUG -8 AM 7:53

Handwritten signature or initials

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> |
|--------------|----------------------|-----------------------|---|
| Member | Cynthia Boulton | 2437 W Bayshore Rd | <input checked="" type="checkbox"/> Add |
| | | Gulf Breeze, FL 32563 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| Member | Robert Scott Boulton | 2437 W Bayshore Rd | <input checked="" type="checkbox"/> Add |
| | | Gulf Breeze, FL 32563 | <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 |
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| | | | <input type="checkbox"/> Change |

