

L23000424421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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A. RIVERS  
OCT 23 2023

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** DeclutterMiami 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:

Ashley Taipale

\_\_\_\_\_  
Name of Person

DeclutterMiami LLC

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

2320 Madison St, 5

\_\_\_\_\_  
Address

Hollywood, FL 33020

\_\_\_\_\_  
City/State and Zip Code

ashley.taipale@gmail.com

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

For further information concerning this matter, please call:

Ashley Taipale

786 872-1929  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

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

**AMBR = Authorized Member**

[illegible]

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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 September 13, 2023

Signature of a member or authorized representative of a member

**Ashley Taipale**

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2023

ASHLEY TAIPALE  
2320 MADISON ST 5  
HOLLYWOOD, FL 33020

SUBJECT: DECLUTTERMIAMI L.L.C.  
Ref. Number: L23000424421

We have received your document for DECLUTTERMIAMI L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers  
Regulatory Specialist III

Letter Number: 623A00022645

OCT 10 2023