

L 2300044 2566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

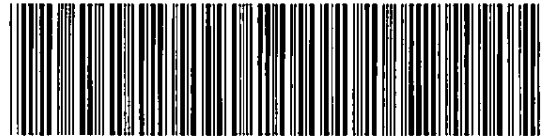
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300419502933

11/29/23--01023--010 \*\*25.00

11/29/23--01023--011 \*\*5.00

2023 NOV 29 PM 12:40

R. HUNT

11/29/23

## COVER LETTER

TO: Registration Section  
Division of Corporations

**SUBJECT:** A4 Holdings 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:

August C Goncalves IV

Name of Person

Firm/Company

3959 Van Dyke Road #289

Address

Luiz, FL 33558

City/State and Zip Code

augusicgon@gmail.com

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

For further information concerning this matter, please call:

August C Goncalves IV

813            534-2188

at (\_\_\_\_\_)

534-2188

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

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1994-1995

**If Changing Registered Agent, Signature of New Registered 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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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2023 MAY 29 PM 12:40

OFFICE OF THE CLERK

2023 NOV 29 PM 12:40

2023 JUL 29 PM 12:40

SECRET

(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 November 22 2023

Signature of a member or authorized representative of a member

August C. Goncalves IV

Typed or printed name of signee

**Filing Fee: \$25.00**