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(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

2023 OCT 19 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Mad Recyclist L.L.C.
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:

Steg August Anderson

Name of Person

MAD RECYCLIST LLC

Firm/Company

4716 Crossway Court

Address

Tallahassee, Florida 32305

City/State and Zip Code

andersonsteg333@gmail.com

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

For further information concerning this matter, please call.

Steg Anderson

Name of Person

850

at ()

Area Code

321-2584

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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TALLAHASSEE, FL

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or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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SECRETARY OF THE
TALLAHASSEE

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2023 OCT 19

[illegible]

SECRETARY OF DEFENSE

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100

(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.

Stacy Anderson
Signature of a member or authorized representative of a member

Steg Anderson
Typed or printed name of signer