

123000547437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

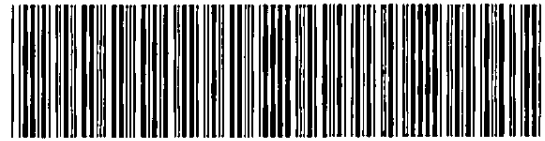
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

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TALLAHASSEE, FL

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C137950 HOLDING 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:

MICHAEL CARBONE

Name of Person

Firm/Company

3609 S. BANANA RIVER BLVD C 509

Address

COWA BEACH FL 32931

City/State and Zip Code

CAPE.HOLDINGS@YAHOO.COM

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

For further information concerning this matter, please call:

MICHAEL CARBONE

Name of Person

at (321)

Area Code

432-4059

Daytime Telephone Number

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SEC. OF STATE
TALLAHASSEE, FL

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

CB3950 HOLDING LLC

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>
MGR	TITAN GEMINI HOLDING LLC	1309 COFFEEN AVE, STE 1200	<input type="checkbox"/> Add
		SACRIDAN, WY 82901 US	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL C CARBONE	3609 S. BANANA RIVER BLVD	<input checked="" type="checkbox"/> Add
		C 508	<input type="checkbox"/> Remove
		CUCUA BEACH, FL 32931	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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OFFICE OF THE SECRETARY OF DEFENSE
WASHINGTON, D.C. 20301-6000

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SCHOOL

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7-12-53

(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 DECEMBER 27 2023

Signature of a member or authorized representative of a member

MICHAEL CARBONE

Typed or printed name of signee

Filing Fee: \$25.00