

L24000096279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

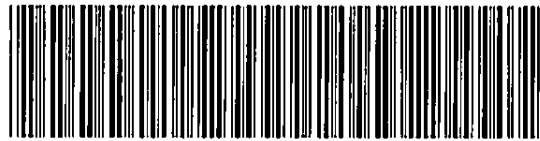
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000427888020

04/17/24--01004--003 \*\*25.00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BYTE U.S. DIRECT 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:

KATHLEEN DALLAS

Name of Person

BYTE U.S. DIRECT LLC

Firm/Company

98 SE 7TH ST

Address

DEERFIELD BEACH FL 33441

City/State and Zip Code

ACCOUNTING@EVENTDECORDIRECT.COM

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

For further information concerning this matter, please call:

ANDREW WALKER

561

223-7699

at ( )

Name of Person

Area Code

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

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

[illegible]