

L24000114343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

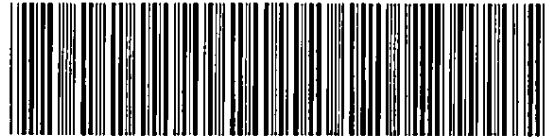
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 05 06 10:10:10

AD

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASCEND HOLDCO 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:

Hampton Tanner

Name of Person

ASCEND HOLDCO LLC

Firm/Company

50 Beachwood

Address

Fernandina Beach, FL 32034

City/State and Zip Code

hamptontanner11@gmail.com

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

For further information concerning this matter, please call:

Leslie Cutahar

904

624.0187

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

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: 1.2

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	Leslie M. Cutajar	50 Beachwood Rd	<input checked="" type="checkbox"/> Add
		Pinecrest, FL 33138	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hampton M. Tanner	50 Beachwood Rd	<input checked="" type="checkbox"/> Add
		Fernandina Beach, FL 32034	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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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.

Dated April 30 2024

Typed or printed name of signee