

L24 000120 908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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(Business Entity Name)

(Document Number)

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2024 AUG 20 AM 11:58
SECRETARY OF STATE
FALLS CHURCH, VA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shimmers Ink & Steel, 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:

Tanya Colson

Name of Person

Firm/Company

265 Sw Inwood Ave

Address

Port Saint Lucie, FL 34984

City/State and Zip Code

shimmers.ink.steel@gmail.com

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

For further information concerning this matter, please call:

Tanya Colson

772

301-9410

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2014 AUG 20 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FL

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>
CEO	Kimberly Sizmore	889 SW Nichols Terrace.	<input type="checkbox"/> Add
		Port Saint Lucie, FL 34953	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joshua Curry	265 SW Inwood Ave.	<input checked="" type="checkbox"/> Add
		Port Saint Lucie, FL 34984	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	Jashua Curry	265 SW Inwood ave	<input checked="" type="checkbox"/> Add
		Port Saint Lucie, FL 34984	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRET
 2024 JUN 20 PM 11:58
 TALENT

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

On address I have added STE 4 as now we have ste 4 & 5

I want to remove CEO Kimerly off the LLC and Add Joshua to CEO and MGR

2024 AUG 20 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 08/1/2024 **(optional)**

(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)

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.

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 August 1st 2024

Signature of a member or authorized representative of a member

Tanya Colson

Typed or printed name of signee

Filing Fee: \$25.00