

L24000189696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

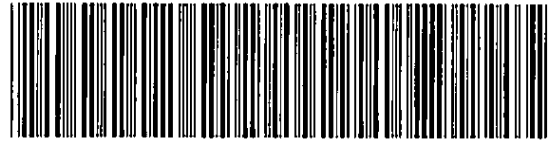
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ready Set Floor, 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:

Katja Kroon

Name of Person

Ready Set Floor, LLC

Firm/Company

7750 N Scenic Hwy

Address

Lake Wales FL 33898

City/State and Zip Code

readysetfloor@gmail.com

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

For further information concerning this matter, please call:

Katja Kroon

863

513-0662

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

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	KARINA, CALDERON M	12713 SADDLE CLUB CIRCLE	<input type="checkbox"/> Add
		TAMPA, FL 33635	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CALDERON, JORGE A	12713 SADDLE CLUB CIRCLE	<input type="checkbox"/> Add
		TAMPA, FL 33635	<input checked="" 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 5/13, 2024

Katja Kroon

Typed or printed name of signee

Filing Fee: \$25.00