

L24000 217977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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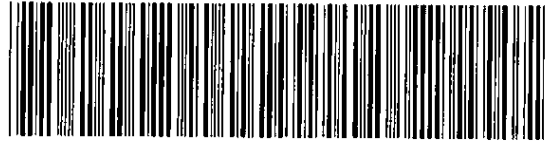
(Business Entity Name)

(Document Number)

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20/04/04

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 1907 Partners 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.

Jeremy W. Dean

\_\_\_\_\_  
Name of Person

Authorized Agent of Company

\_\_\_\_\_  
Firm/Company

P.O. Box 4391

\_\_\_\_\_  
Address

Portland, Maine 04101

\_\_\_\_\_  
City/State and Zip Code

jwdean@jwdlegal.com

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

For further information concerning this matter, please call:

Jeremy W. Dean

207 805-2088  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

2011 DEC 7 PM 3:39  
STATE OF FLORIDA  
TALLAHASSEE, FL

3-D

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

## 1907 Partners 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>
AMBR	Furkan Cem Beyazit	1950 MAYFAIR STREET NAPLES, FL 34104	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Muhammet Basri Sahin	1950 MAYFAIR STREET NAPLES, FL 34104	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

2011. 12. 21 PM 3: 35  
CLERK OF STATE  
TALLAHASSEE, FL

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (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. or the earlier of: (b) The 90th day after the record is filed.

Dated August 21, 2024

Signature of a member or authorized representative of a member

**Jeremy W. Dean, Authorized Representative of Company Members**

Typed or printed name of signee

**Filing Fee: \$25.00**