

L24

000

280

451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

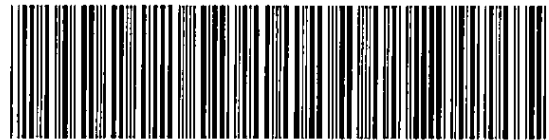
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200434166332

08/14/24--01027--004 **25.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NORTHFLOW WATERSPORTS ADVENTURES, 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:

LEONARDO F. BRITO, ESQ.

Name of Person

BOGIN, MUNNS AND MUNNS, PA

Firm/Company

1000 LEGION PLACE, SUITE 1000

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

LBRITO@BOGINMUNNS.COM

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

For further information concerning this matter, please call:

LEONARDO F. BRITO

407

578-1334

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

II 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	SAW VENTURES, LLC	2230 AMPERE DRIVE	<input type="checkbox"/> Add
		LOUISVILLE, KENTUCKY 40299	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SUN SABER PROPERTIES II, LL	2230 AMPERE DRIVE	<input checked="" type="checkbox"/> Add
		LOUISVILLE, KY 40299	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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 July 10, 2024

Scott Weis

Filing Fee: \$25.00