

L24 000 292 057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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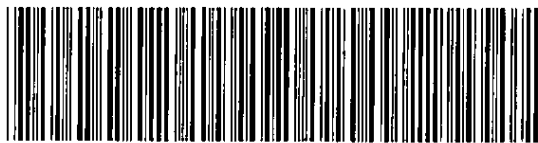
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lefty's Tactical, 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:

Trisha Del Rosario

Name of Person

Firm/Company

7120 NW 173rd Drive, #1201

Address

Hialeah, FL 33015

City/State and Zip Code

Trishad23@gmail.com

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

For further information concerning this matter, please call:

Trisha Del Roario

617 363-6065
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

FILED
2021 SEP 10 11:24
SECRETARY OF STATE
TALLAHASSEE, FL

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2021 SEP 10 AM 11
SECRETARY OF
TALLAHASSEE

07/01/2024

(optional)

SECRETARY OF STATE
TALLAHASSEE, FL.
2021 SEP 10 AM 11:24

Note:

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.

07/24/2024

Signature of a member or authorized representative of a member

Brian L. Jacobs

Typed or printed name of signee

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