

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vivid Management 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:

Gregory Stfort
Name of Person

Vivid Management LLC
Firm/Company

1648 NE 158th St
Address

North Miami Beach, FL 33162
City/State and Zip Code

Gstfort0906@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gregory Stfort at (754) 801-0361
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

Cover Letter

Gregory St. Fort

Ph# 754-801-0361

Return Address: 1648 NE 158th St.

North Miami Beach, Fl. 33162

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	Gregory stfort	1648 NE 158 th ST	<input checked="" type="checkbox"/> Add
		North Miami Beach, FL 33162	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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