

L24000432358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

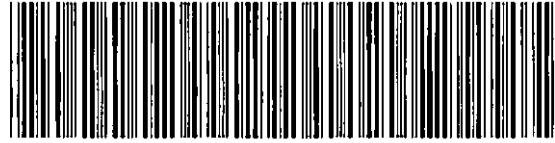
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**


SUBJECT: N.E.A. TAYLOR, 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:

S. Scott Critzer
Name of Person
The Critzer Law Firm PA
Firm/Company
12889 US Hwy 98 W, Unit 110A
Address
Miramar Beach FL 32550
City/State and Zip Code
scott@critzerlaw.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

For further information concerning this matter, please call:

S. Scott Critzer 
Name of Person at (850) 685-4285
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 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	ELMIRA T. TAYLOR	270 STEVENSON SQUARE ALEXANDRIA VA 22304-3510	

Add

Remove

Change

MGR	ELMIRA T. ASONGWED	270 STEVENSON SQUARE ALEXANDRIA VA 22304-3510	
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Remove

Change

Add

Remove

Change

Add

Remove

Change

Add

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Add

Remove

Change

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

The name of the initial manager was incorrectly spelled on the original filing. That manager is being removed
and the correctly spelled name (same person) is being added.

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STATE ARCHIVE OF FLA
TALLAHASSEE, FL

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E. Effective date, if other than the date of filing: 10/21/2024 (optional)

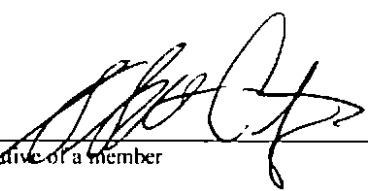
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's 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. on the earlier of: (b) The 90th day after the record is filed.

Dated 21/10/24 . 2 0 2 4 .

Elmira T. Asongwed
Elmira T. Asongwed (Oct 21, 2024 15:43 EDT)

Signature of a member or authorized representative of a member



ELMIRA T. ASONGWED

Typed or printed name of signee

Attorney 10-22-24