

MID 000004759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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11 JAN 13 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E-Z Roll Tobacco, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine Holovatick
Name of Person

E-Z Roll Tobacco, LLC
Firm/Company

2971 Algonquin Dr.
Address

Poland Ohio 44514
City/State and Zip Code

cnd @zoominternet.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Holovatick at (330) 261-7256
Name of Person Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: E-Z Roll Tobacco, LLC.

2. This entity was formed under the laws of: Florida.

3. This entity was authorized to transact business in Florida on 10-27-10
and its Florida document/registration number is M10000004759.

4. The name and address of each manager or managing member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

Christine Holovatick
2971 Algonquin Dr.
Poland Ohio 44514

Required Signature: _____

Christine Holovatick

Signature of Manager, Managing Member or Member

Filing Fee: \$25

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TALLAHASSEE, FLORIDA