

L22000102608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

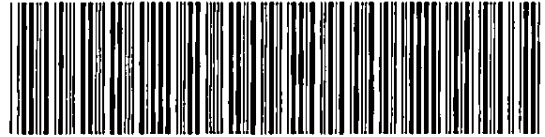
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900433027299

07/16/24--01026--002 \*\*25.00

RECEIVED  
STATE  
TALLAHASSEE, FL  
JUL 15 PM 3:21

RECEIVED  
07/16/24

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Five Blessings 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:

Rima Barakat  
Name of Person  
Firm/Company  
7423 royal Crescent Court  
Address  
Port Richey,FL 34668  
City/State and Zip Code  
rimabarakat5@gmail.com  
E-mail address: (to be used for future annual report notification)

2007 JUN 15 PM 3:21  
STATE  
TALLHASSEE, FL

For further information concerning this matter, please call:

Rima barakat 386 898-1030  
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



