

L14000151556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

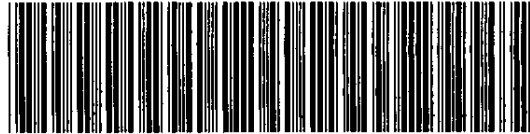
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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S Warren
JUN 10 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 1777 Aurora Road 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:

James T White

Name of Person

Firm/Company

508 N Habror City Blvd

Address

Melbourne, Florida, 32935

City/State and Zip Code

james@wesaysold.com

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

For further information concerning this matter, please call:

James T White

321 368-5445
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/COURIER ADDRESS:

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

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>
AMBR	A & J Living Trust LLC	508 N Harbor City Blvd	<input checked="" type="checkbox"/> Add
		Melbourne, Fl	<input type="checkbox"/> Remove
		32935	<input type="checkbox"/> Change
AMBR	T & S Living Trust LLC	508 N Harbor City Blvd	<input checked="" type="checkbox"/> Add
		Melbourne, Florida	<input type="checkbox"/> Remove
		32935	<input type="checkbox"/> Change
MBR	White, James Timothy	508 N Harbor City Blvd	<input type="checkbox"/> Add
		Melbourne, Florida	<input checked="" type="checkbox"/> Remove
		32935	<input type="checkbox"/> Change
MBR	Andrew, Easler David	508 N Harbor City Blvd	<input type="checkbox"/> Add
		Melbourne, Fl	<input checked="" type="checkbox"/> Remove
		32935	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. On the far left edge, there is a small black dot and some faint, illegible markings, possibly from a binder or scanning artifact. The rest of the page is completely blank.

E. Effective date, if other than the date of filing: _____ (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 June 6, 2016

Signature of a member or authorized representative of a member

Typed or printed name of signee

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Filing Fee: \$25.00

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