

LO3000026318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

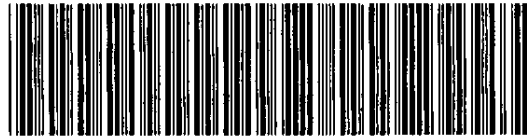
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

FEB 22 2013

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Christa, 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:

**Donald G. Trezona**

Name of Person

**Christa Touch, LLC**

Firm/Company

**19455 SW 288 Street**

Address

**Homestead, FL 33030**

City/State and Zip Code

**sandy@heavenlytouchmiami.com**

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

For further information concerning this matter, please call:

**Sandy Trezona**

Name of Person

at **(305) 242-4472**

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

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TALLAHASSEE, FLORIDA

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
mgrm	Donald G. Trezona	19455 SW 288 Street	<input checked="" type="checkbox"/> Add
		Homestead, FL 33030	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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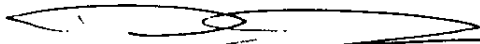
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Dated February 20, 2013.



Signature of a member or authorized representative of a member

Donald G. Trezona

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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