

L03000051809

(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



400078924704

09/08/06--01009--018 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT - 6 AM 10:50

J. BRYAN SEP 13 2006

J. BRYAN OCT - 6 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2006

JEANNE GAZLAY
1418 IMPATIENS CT
NEW PORT RICHEY, FL 34655

SUBJECT: A+ SEAMLESS GUTTERS, LLC
Ref. Number: L03000051809

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
06 OCT - 6 AM 10:50

We have received your document for A+ SEAMLESS GUTTERS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 706A00055141

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A + Seamless Gutters, LLC.
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeanne Gazlay
(Name of Person)

(Firm/Company)

1418 Impatiens CT
(Address)

New Port Richey FL 34655
(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT - 6 AM 10:50

For further information concerning this matter, please call:

Jeanne Gazlay at (813) 765-7956
(Name of Person) (Area Code & 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

Previously submitted check for \$35.00
Please see enclosed letter from
Joey Bryan.

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- INHS18 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT -6 AM 10:50