

LD5000104594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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MAY 21 2013

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A SUNSHINE HOME IMPROVEMENT 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:

GARY D'SA

Name of Person

A SUNSHINE HOME IMPROVEMENT LLC

Firm/Company

6770 82ND AVE N

Address

PINELLAS PARK, FL 33781

City/State and Zip Code

garyd77sa@yahoo.com

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

For further information concerning this matter, please call:

GARY D'SA

Name of Person

at (

727

) Area Code & Daytime Telephone Number

222-7822

~~541-5828~~

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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

A SUNSHINE HOME IMPROVEMENT, LLC

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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>
MGR	LAMARTINE D'SA	6770 82ND AVE N	<input type="checkbox"/> Add
		PINELLAS PARK, FL 33781	<input checked="" type="checkbox"/> Remove
MGR	GARY C D'SA	6770 82ND AVE N	<input checked="" type="checkbox"/> Add
		PINELLAS PARK, FL 33781	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

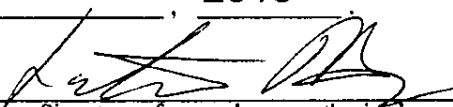
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated MAY 09, 2013



Signature of a member or authorized representative of a member

LAMARTINE D'SA

Typed or printed name of signee

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Filing Fee: \$25.00

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