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DEC 22 2016

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LEAF OF FAITH CONSTRUCTION, 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:

STEVEN W. BARTON

Name of Person

Firm/Company

2886 DAWKINS ST. NE

Address

VERNON, FL 32462

City/State and Zip Code

PCB44 STEVE@GMAIL.COM

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

For further information concerning this matter, please call:

STEVEN W. BARTON

Name of Person

at (850)

Area Code

258 6771

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>
<u>MGR</u>	<u>JAMES DARRELL TERRY</u>	<u>11113 DARTMOUTH PL</u>	<input checked="" type="checkbox"/> Add
		<u>PANAMA CITY, FL 32404</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGRM</u>	<u>KATHIE A BARTON</u>	<u>2886 DAWKINS ST</u>	<input type="checkbox"/> Add
		<u>VERNON, FL 32462</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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**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 DECEMBER 17, 2016

x Str Best

Signature of a member or authorized representative of a member

STEVEN W BARTON

Typed or printed name of signee