## L06000032071

(Requestor's Name)		
(Address)		
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Do	ocument Number)	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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Add change 2/23/11

MRVEL

## Florida Department of State

**Division of Corporations** 



Please print and return this page, along with your check or money order, to the Division of Corporations

## 2011 Annual Report Payment Voucher

Name of Entity: BIANCA W. EVANS LLC

Document Number: L06000032071

Tracking number: 000189371850

Election Contribution: No

Certificate of Status: No

Total Amount Due: \$138.75

For Office Use Only

Address change :

9385 Tramore GlenCt

Jacksonville FL 32256

Please make check, or money order payable to: Florida Department of State

· Remove the check stub, if applicable

. Staple check in the top left hand corner of this voucher

Mail to: Division of Corporations, P.O. Box 6198, Tallahassee, FL 32314

This voucher must be received by the Division of Corporations within 30 days or it will be considered abandoned.

Daytime telephone number for possible processing questions:

904-254-7846