

LDL0000097067

(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



500215088385

12/14/11--01013--011 **25.00

FILED
11 DEC 14 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC 16 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ameritech Enterprises, 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:

Robert Miller

Name of Person

Ameritech Enterprises, LLC

Firm/Company

P.O. Box 9580

Address

Panama City Beach, FL 32417

City/State and Zip Code

bob@ameritechroofing.com

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

For further information concerning this matter, please call:

Bob Miller

Name of Person

at (850)

234-0800

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC 14 AM 10:22

FILED

Page 1 of 2

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

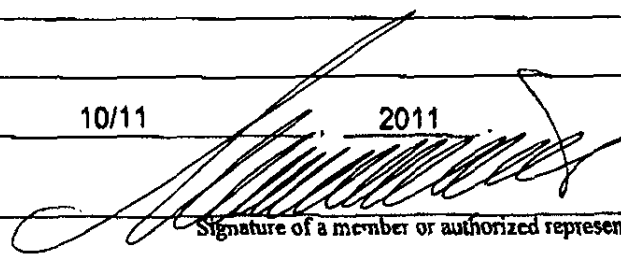
Title	Name	Address	Type of Action
MGRM	Miller, Robert A.	108 Estes Place Panama City Beach, FL 32413	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Miller Revocable Trust	108 Estes Place Panama City Beach, FL 32413	<input checked="" type="checkbox"/> Add <input type="checkbox"/> 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

10/11

2011



Signature of a member or authorized representative of a member

Robert A. Miller

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
 11 DEC 14 AM 10:22
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA