

LDL0000097393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

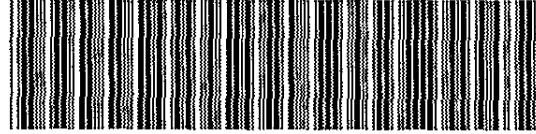
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT 26 PM 3:13

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Reis Mucaj Faux Finishing  
(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:

Reis Mucaj  
(Name of Person)

Reis Mucaj faux finishing  
(Firm/Company)

8050 Big Pine way  
(Address)

Riviera Beach Fl, 33407  
(City/State and Zip Code)

For further information concerning this matter, please call:

Reis Mucaj at ( 561 ) 346-3824  
(Name of Person) (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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Reis Mucaj Faux Finishing LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on October 5, 2006 and assigned document number L06000097393

**SECOND:** This amendment is submitted to amend the following:

Missing information on the form was manager/ member detail

can you please put my information on the form and the title which is

Reis Mucaj President

8050 Big Pine way

Riviera Beach FL, 33407

Tel: 561- 346-3824

Thank you.

Dated October 20, 2006

Reis Mucaj

Signature of a member or authorized representative of a member

Reis Mucaj

Typed or printed name of signee

**Filing Fee: \$25.00**

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