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COVER LETTER

Division of Corporations	
SUBJECT: MIKO CUSTOM RENOUATIONS, LLC (Name of Limited Liability Company)	_
(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 ANDREWS (Name of Person)	
(Name of Person)	
MIKKO CUSTOM RENOVATIONS (Firm/Company)	
(Firm/Company)	
7393 TRESCOTT DR	
7393 TRESCOTT DR (Address) PS	20
L. E. C.	= -
LAKEWORTH FL 33467 EM	
City/State and Zip Code)	<u></u>
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For further information concerning this matter, please call:	
or in the first information concerning this matter, please can:	P # 2
D = 4 50 50 50 50 50 50 50 50 50 50 50 50 50	20
For further information concerning this matter, please call: Polsept Andrews at (56) 542-46 8855 (Name of Person) (Area Code & Daytime Telephone Nur	
(Name of Ferson) (Area Code & Daytime Terephotic Num	iliber)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing	ng Fee,
Certificate of Status Certified Copy Certificate of	Status &
(additional copy is enclosed) Certified Cop	y opy is enclosed)
(authority)	·PJ 10 ULUIOOUI)

MAILING ADDRESS:

Registration Section

TO:

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

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