

607000065543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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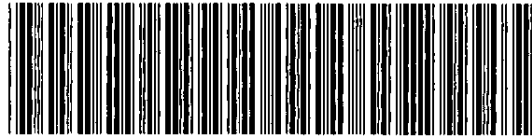
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AMSTATE 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:

LAWRENCE SMITH

(Name of Person)

AMSTATE LLC

(Firm/Company)

12820 KENWOOD LANE SUITE 5

(Address)

FORT MYERS FL 33907

(City/State and Zip Code)

For further information concerning this matter, please call:

LAWRENCE SMITH

(Name of Person)

at ( 239 ) 415-7653

(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

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TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

AMSTATE LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 6/21/2007 and assigned  
document number L07000065543.

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

**MANAGER/MEMBER DETAIL**

**Name & Address**

**Title MGR**

**Smith Lawrence R; 2813 SE20th Ave Cape Coral FI 33904**

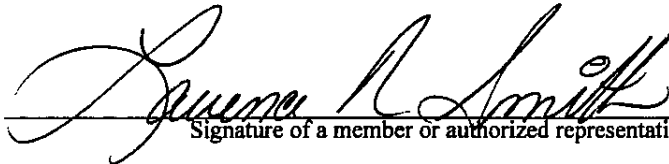
**Title MGR**

**CRISTALDI, STEVEN; 2803 SW 36TH TER CAPE CORAL FL 33904**

**Title MGR**

**Holleran Timothy; 2043 SE 28th TER Cape Coral FI 33904**

Dated August 29, 2007.



Signature of a member or authorized representative of a member

**Lawrence R. Smith**

Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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