

LO7 000075700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

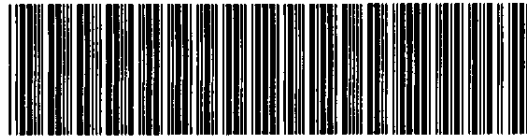
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

SEP 13 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THOMPSON'S AUTO SERVICE, 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:

CHRISTOPHER O. MARSH

Name of Person

ECONOTAX OF NORTHWEST FLORIDA

Firm/Company

139 BEAL PARKWAY SE, SUITE 102

Address

FORT WALTON BEACH, FL 32548

City/State and Zip Code

CHRIS@ECONOTAXFWB.COM

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

For further information concerning this matter, please call:

CHRISTOPHER MARSH

Name of Person

at (850) 863-4829

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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THOMPSON'S AUTO SERVICE, LLC.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGRM	JESSE THOMPSON	121 B BEACH DRIVE FORT WALTON BEACH, FL 32547	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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MGRM	KIMBERLY THOMPSON	121 B BEACH DRIVE FORT WALTON BEACH, FL 32547	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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2011 SEP 12 AM 10:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

Dated SEPTEMBER 7, 2011

Kimberly Thompson
Signature of a member or authorized representative of a member
Kimberly Thompson
Typed or printed name of signee