

L08000026945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

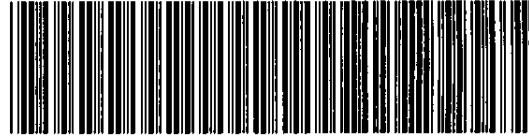
Special Instructions to Filing Officer:

A. LUNT

JUN -1 2010

EXAMINER

Office Use Only



200208204272

05/31/11--01018--025 **60.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2011 MAY 31 PM 3:06

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MHJCSS, 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:

Harry R Darling

Name of Person

Clear Span Structures, LLC

Firm/Company

2000 Avenue P Suite 5

Address

Riviera Beach, FL 33404

City/State and Zip Code

hdarling@cssbuilds.com

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

FILED
2011 MAY 31 PM 3:06
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Harry Darling

Name of Person

at (561)

803-8100

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

MHJCSS, 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:

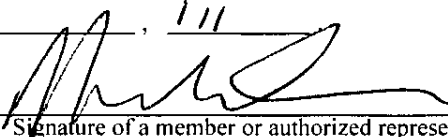
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mrs	Jane C. Darling MGR	2000 Avenue P Suite 5 Riviera Beach, FL 33418	<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
			<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

5/25
MAY 25TH



Signature of a member or authorized representative of a member

Harry R. Darling

Typed or printed name of signee