

L08000045388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

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08/29/08--01004--017 \*\*25.00

T. HAMPTON

SEP 15 2008

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: R&L Adventures 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:

Landa Sue Watson

(Name of Person)

R&L Adventures LLC

(Firm/Company)

1635 Oakhurst Avenue

(Address)

Winter Park, FL 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Landa Sue Watson

(Name of Person)

at ( 407 ) 222-9998

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

08 SEP 12 PM 4:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 2, 2008

LANDA SUE WATSON  
1635 OAKHURST AVE  
WINTER PARK, FL 32789

SUBJECT: R&L ADVENTURES, LLC  
Ref. Number: L08000045388

We have received your document for R&L ADVENTURES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or manager of the limited liability company.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 908A00048297



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

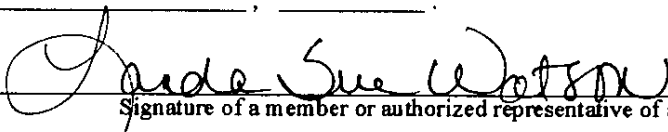
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dennis B Thomas	1635 Oakhurst Avenue Winter Park, FL 32789	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Ronald J Grutz	4493 S Atlantic Avenue, #503 Winter Park, FL 32169	<input type="checkbox"/> Add <input checked="" 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 \_\_\_\_\_, \_\_\_\_\_



Signature of a member or authorized representative of a member

Landa Sue Watson

Typed or printed name of signee