

LD8000048423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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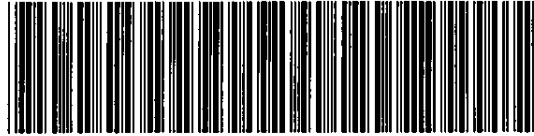
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LEFRANG UNIFORMS 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:

MARTHA LARGAESPADA  
(Name of Person)  
LEFRANG UNIFORMS LLC  
(Firm/Company)  
5210 NW 5th St  
(Address)  
MIAMI FL 33126  
(City/State and Zip Code)

For further information concerning this matter, please call:

MARTHA LARGAESPADA at (786) 426-1960  
(Name of Person) (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

✓ LEFRANG UNIFORMS LLC

The Articles of Organization for this Limited Liability Company were filed on 5/17/2008 and assigned Florida document number 108000048423

Page 1 of 2

**MGR = Manager**  
**MGRM = Managing Member**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary)*

Dated

5/16/08

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

**Filing Fee: \$25.00**

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