

LD9000018675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

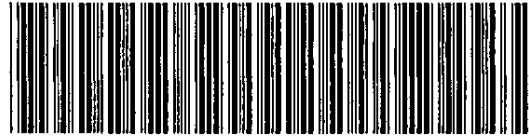
(Business Entity Name)

(Document Number)

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12 AUG -1 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State

Registration Services

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

T & L Repair, LLC

Tim Vullo

Lisa Vullo

4006 Bastia Court

Punta Gorda, FL 33950

July 21, 2012

To Whom it May Concern:

Attached is the required paperwork and check to remove Lisa Vullo from T & L Repair. A day time contact for Tim Vullo is 941-875-8856 and one for Lisa Vullo is 941-875-5948. The return address is listed below:

4006 Bastia Court

Punta Gorda, FL 33950

Thank you for your time.

Sincerely,

Tim Vullo

Lisa Vullo

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: T & L Repair 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:

Timothy Vullo
Name of Person

T & L Repair LLC
Firm/Company

4006 Bastia Court
Address

Punta Gorda, FL 33950
City/State and Zip Code

timothyvullo@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Vullo at (941) 875-8856
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

12 AUG -1 PM 12: 24

T & L Repair LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 25, 2009 and assigned Florida document number L09000018675.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

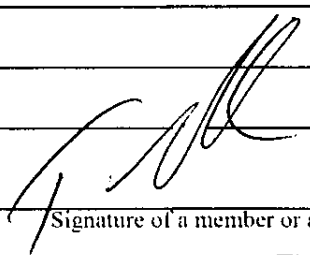
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Lisa Vullo	4006 Bastia Court	<input type="checkbox"/> Add
		Punta Gorda, FL 33950	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated _____



Signature of a member or authorized representative of a member

Timothy Vullo

Typed or printed name of signee