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(Requestor's Name)

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(City/State/Zip/Phone #)

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10 JUN - 1 AM 8:29

~~10 MAY 29 PM 2:42~~

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 02 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: D&D PAINT & COATINGS 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:

BOBBY D SCHRAMM

Name of Person

D&D PAINT & COATINGS LLC.

Firm/Company

113 TRENTON AVE

Address

CRESTVIEW, FL 32539

City/State and Zip Code

ROB59@COX.NET

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

For further information concerning this matter, please call:

BOBBY D SCHRAMM

Name of Person

at (**850**)

978-1615

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

D&D PAINT & COATINGS LLC.

Page 1 of 2

FILED
10 JUN -1 AM 8:29
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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10 MAY 29 PM 2:42
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TALLAHASSEE, FLORIDA
ter the name of th

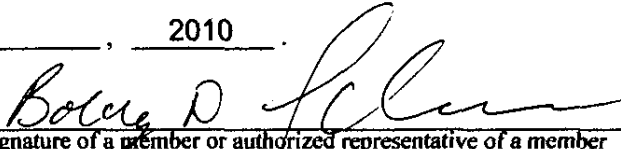
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BRUCE E RASMUSSEN	166 VILLACREST DR CRESTVIEW, FL 32536	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<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.)

Dated MAY 26, 2010


Signature of a member or authorized representative of a member

BOBBY D SCHRAMM MGRM
Typed or printed name of signer