

LD9000043507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

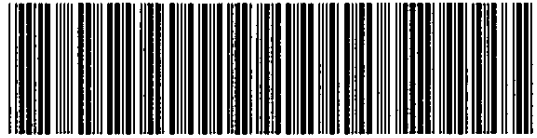
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300159216353

08/05/09--01010--001 \*\*25.00

**FILED**  
09 AUG -5 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**D. BRUCE**  
AUG 06 2009  
**EXAMINER**

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: Add members  
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:

Peter m flynn  
Name of Person

A Architectural accents in precast LLC  
Firm/Company

112sw 4th st  
Address

Daina 33004  
City/State and Zip Code

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

For further information concerning this matter, please call:

Peter m flynn at ( 954 ) 444 9518  
Name of Person Area Code & Daytime Telephone Number

FILED  
09 AUG - 5 PM 12: 28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

## A Architectural accents in precast LLC

Page 1 of 2

FILED  
09 AUG -5 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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	Albert Austin	1106nw second street Daina FL 33004	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Roberto Ruiz	4308nw 55street ft lauderdale FL 33319	<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

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

Dated

7/31/09

Signature of a member or authorized representative of a member

Peter M Flynn

July 31/09

Typed or printed name of signer

FILED  
09 AUG -5 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA