

L09000059892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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*Amend*

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10 SEP -2 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. CAUSSEAU

SEP - 2 2010

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ATLANTIC COAST AUTOS 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:

DAN DEXTER

Name of Person

ATLANTIC COAST AUTOS

Firm/Company

13638 ATLANTIC BLVD

Address

JACKSONVILLE FL 32225

City/State and Zip Code

DANDEXTERJR@AOL.COM

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

For further information concerning this matter, please call:

DAN DEXTER

Name of Person

at ( 904 )

616-4593

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

August 2, 2010

DAN DEXTER  
13638 ATLANTIC BLVD.  
JACKSONVILLE, FL 32225

SUBJECT: ATLANTIC COAST AUTOS LLC  
Ref. Number: L09000059892

We have received your document for ATLANTIC COAST AUTOS LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 010A00018548

## ATLANTIC COAST AUTOS LLC

Page 1 of 2

If amending the Managers or Managing Members of 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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
10 SEP -2 PM 12:55  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Dated 8, 5, 2010

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

DAN DEKTOR  
\_\_\_\_\_  
Typed or printed name of signee