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TALLAHASSEE, FLORIDA

S. HAWKES
FEB 23 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TET'S Welding and Fabrication 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:

TED Will

Name of Person

Firm/Company

493 SEACREST AVE

Address

MERCER IS, FL 32952

City/State and Zip Code

TNTFABRICATION@HOTMAIL.COM

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

For further information concerning this matter, please call:

TED Will

Name of Person

at (321) 288 6491

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

T&T'S Welding And Fabrication LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 2

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	TED WILL JR.	493 SEACREST AVE. MERRITT IS. FL 32552	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	TED WILL JR.	493 SEACREST AVE. MERRITT IS. FL 32552	<input type="checkbox"/> Add <input checked="" 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

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TALLAHASSEE, FLORIDA

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

Dated 2/19/2010, _____
Ted L. Will Jr.
Signature of a member or authorized representative of a member
TED L WILL JR.
Typed or printed name of signee