

L11000041013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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04/28/14--01019--013 **60.00

EFFECTIVE DATE 05-01-14

2014 APR 30 10:13
2014 APR 30 10:13
2014 APR 30 10:13

B. BOSTICK

APR 30 2014

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RAS AUTO SALES 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:

MARC FIXLER

Name of Person

MARC A FIXLER CPA PA

Firm/Company

1505 NW 159 AVENUE

Address

PEMBROKE PINES, FL 33028

City/State and Zip Code

fixcpa@aol.com

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

For further information concerning this matter, please call:

MARC FIXLER

Name of Person

at

954 663-8781

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

Page 1 of 3

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

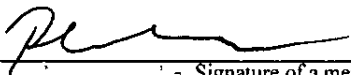
MGR = Manager
AMBR = Authorized Member

<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
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: MAY 1, 2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated APRIL 24, 2014



Signature of a member or authorized representative of a member
RONALD SEDLEY

Typed or printed name of signee

2014 APR 28 17 342
FBI