

L11000060507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

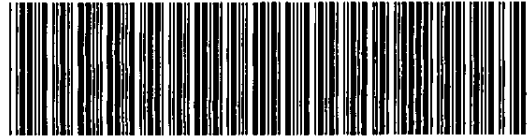
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200210805912

08/11/11--01005--012 **25.00

FILED
11 AUG 11 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 12 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LTD floor installation
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:

Levi Carter
Name of Person

LTD floor installation
Firm/Company

8869 SE 126th Pl
Address

Belleview FL 34420
City/State and Zip Code

LCarter001@cfl-rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Levi Carter at (352) 553-2398
Name of Person 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

FILED
11 AUG 11 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L & D Floor Installation L.L.C.
(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

Title	Name	Address	Type of Action
MGRM	Levi Carter	8869 SE. 126th Pl Belleview FL 34420	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated August 8th, 2011.


Signature of a member or authorized representative of a member
Levi Carter
Typed or printed name of signee

FILED
11 AUG 11 PM 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA