

L110000088885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

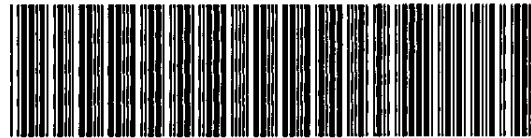
(Business Entity Name)

(Document Number)

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2011 SEP 15 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

SEP 18 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Last Chance Motors 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:

Julie Patterson

Name of Person

Last Chance Motors LLC

Firm/Company

516 South Shell RD

Address

DeBary, FL 32713

City/State and Zip Code

jpandjp@bellsouth.net

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

For further information concerning this matter, please call:

Julie Patterson

Name of Person

at (386)

804-4933

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

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	Clifton E Patterson	516 South Shell RD DeBary, FL 32713	<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
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

FILED
 2011 SEP 15 AM 11:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated September 12, 2011

Julie M Patterson
Signature of a member or authorized representative of a member

Julie M Patterson
Typed or printed name of signee