

211000131516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

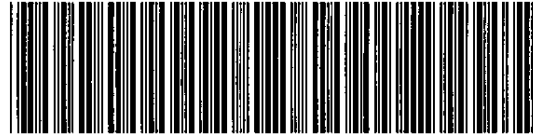
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200299343022

05/30/17--01046--010 **25.00

17 MAY 30 PM 4:04
FILED

O SIMMONS

JUN 01 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Metal Fabrications, 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:

Elise Gross, Esq.

Name of Person

The Presser Law Firm, P.A.

Firm/Company

6199 N. Federal Highway

Address

Boca Raton, FL 33487

City/State and Zip Code

eg@assetprotectionattorneys.com

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

For further information concerning this matter, please call:

Elise Gross

561 953-1050
at ()

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
President	Eric M. Sharkey	2910 Kerry Forest Pkwy, D4-1	<input type="checkbox"/> Add
		Tallahassee, FL 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
President	Erin Ennis	2910 Kerry Forest Pkwy, D4-1	<input checked="" type="checkbox"/> Add
		Tallahassee, FL 32309	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

171103011

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 15, 2017

Signature of a member or authorized representative of a member

Demory S. Boeneke, Manager

Typed or printed name of signee