

L120000012059

(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

G. MCLEOD

MAR - 9 2012

EXAMINER



700224026257

03/08/12--01011--004 **25.00

FILED
12 MAR - 8 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aries Moon Properties of Virginia, 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:

Alan M. Stein

Name of Person

Alan M. Stein Accounting & Tax Service, Inc.

Firm/Company

3930 E State Rd 64

Address

Bradenton, FL 34208

City/State and Zip Code

steinaccounting@yahoo.com

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

For further information concerning this matter, please call:

Alan Stein

Name of Person

at (941)

749-5364

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

Aries Moon Properties of Virginia, 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>
MGRM	Michael A. Moore	11708 FAIRFAX WOODS WAY APT 21101 FAIRFAX VA 22030	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Michael H. Moore, Jr.	11708 FAIRFAX WOODS WAY APT 21101 FAIRFAX VA 22030	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Valerie H. Moore	11708 FAIRFAX WOODS WAY APT 21101 FAIRFAX VA 22030	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Valerie A. Moore	11708 FAIRFAX WOODS WAY APT 21101 FAIRFAX VA 22030	<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

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

Dated February 10, 2012

Michael H. Moore Jr.
Signature of a member or authorized representative of a member

Michael H. Moore
Typed or printed name of signee