

L12000136815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

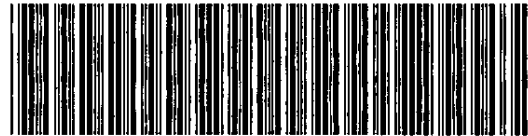
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

JUN 5 2013

S. TONER

Office Use Only



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05/13/13--01045--016 \*\*43.75

FILED  
13 JUN -5 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 17, 2013

L. PAUL HENDRIKS JR  
2438 WHITEHORSE ST PSL, LLC  
390 S.W. SOUTH RIVER DR, UNIT 206  
STUART, FL 34997

SUBJECT: 2438 WHITEHORSE ST PSL, LLC  
Ref. Number: L12000136815

We have received your document for 2438 WHITEHORSE ST PSL, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sean Toner  
Senior Section Administrator

Letter Number: 113A00012497

RECEIVED  
13 JUN - 5 AM 9:20  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2438 WHITEHORSE ST, PSL, LLC  
Name of Limited Liability Company  
L 12000 136815

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

L. PAUL HENDRIKS JR  
Name of Person

2438 WHITEHORSE ST, PSL, LLC  
Firm/Company

390 S.W. SOUTH RIVER DR, UNIT #206  
Address

STUART FL 34997  
City/State and Zip Code

m.hendriks@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

L. PAUL HENDRIKS JR at (772) 260-8444  
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

2438 WHITEHORSE ST, PSL, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Page 1 of 3

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>
MGR	L. PAUL HENDRIKS SR	390 S.W. SOUTH RIVER DR UNIT # 206 STUART, FL. 34997	<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
			<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.)*

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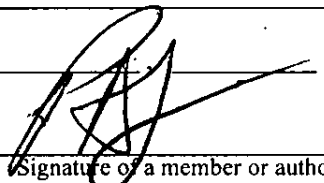
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Dated

6/3/13  
x



Signature of a member or authorized representative of a member

L. PAUL HENDRICKS JR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00