

L12000147996

V

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FALL ARKISS 10:00P

B. BOSTICK

NOV - 4 2013

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: C & J Stucco and Stone 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:

Christopher P Crain

Name of Person

Firm/Company

4144 Tonbridge Circle

Address

Pensacola, FL 32514

City/State and Zip Code

chriscrain.hilton@gmail.com

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

For further information concerning this matter, please call:

Christopher Crain

Name of Person

at ( ) 850 712-4332

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

2013 NOV - 1 PM 1:59  
TALLAHASSEE, FL



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	GEORGE TROY CRAIN	900 FT PICKENS RD	<input checked="" type="checkbox"/> Add
		UNIT 213	<input type="checkbox"/> Remove
		PENSACOLA BCH, FL 32561	
MGRM	JUNE WASCHER	4144 TONBRIDGE CIR	<input checked="" type="checkbox"/> Add
		PENSACOLA, FL 32514	<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

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FL 32501  
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

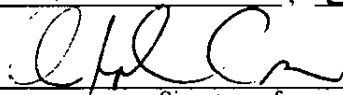
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Dated 10-28-, 2013.



Signature of a member or authorized representative of a member

**CHRISTOPHER P CRAIN**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

2013 NOV -1 PM 1:59  
FALLS CHURCH, VA