

L13000003265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

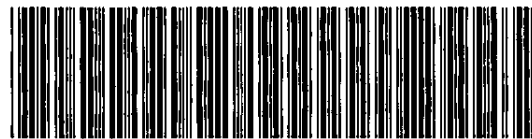
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/09/13--01028--003 **25.00

2013 DEC -9 AM 11:54
TALLAHASSEE, FL 32309

B. BOSTICK

DEC 12 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PEGASUS PAINTS, 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:

BENAN SANLIER
Name of Person

PEGASUS PAINTS, LLC
Firm/Company

1335 W. BRANDOW BLVD.
Address

BRANDOW, FL 33511
City/State and Zip Code

BENAN@PEGASUSPAINT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BENAN SANLIER at (PB) 299-9747
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

TALLAHASSEE, FLORIDA

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Pegasus Paints LLC

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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	HAFEEZ, ZEESHAN	6103 MARBELLA BLVD	<input type="checkbox"/> Add
		APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 12/04/13,

X Benan Saulier

Signature of a member or authorized representative of a member

BENAN SAULIER

Typed or printed name of signee

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Filing Fee: \$25.00

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FALLMANSST. 110444