

L13000093998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

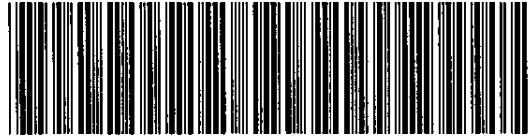
(Business Entity Name)

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DIVISION OF CORPORATION
15 MAY 11 PM 3:05
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUNSET DESIGNS OF MIRAMAR BEACH, 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:

Kenneth Chase Green

Name of Person

Sunset Designs of Miramar Beach, LLC

Firm/Company

25 St. Simon Circle

Address

Miramar Beach, FL 32550

City/State and Zip Code

k.chase.green@gmail.com

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

For further information concerning this matter, please call:

Chase Green

850 4287889

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SUNSET DESIGNS OF MIRAMAR BEACH, LLC

Page 1 of 3

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 11 PM 3:05
TALLAHASSEE, FLORIDA
I hereby agree to comply with the provisions of the Florida Statutes relating to the filing of this document and to indemnify and hold the Secretary of State harmless from all claims and damages, including reasonable attorney's fees, that may be asserted against or incurred by the Secretary of State or the Department of State as a result of this filing.
Registered Agent

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 5/7/15, _____

Vickie Green

Signature of a member or authorized representative of a member

Vickie Green

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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DIVISION OF CORPORATION
15 MAY 11 PM 3:05
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