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(Requestor's Name)

(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG - 8 2013  
D. BUTLER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Repair Maintance 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:

Nevelle Rowe

Name of Person

Repair Maintance LLC

Firm/Company

6066 Wedgewood Circle

Address

Orlando FL 32808

City/State and Zip Code

sherlynleonard@bellsouth.net

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

For further information concerning this matter, please call:

Nevelle Rowe

Name of Person

321 228-6243

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

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TALLAHASSEE, FLORIDA



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

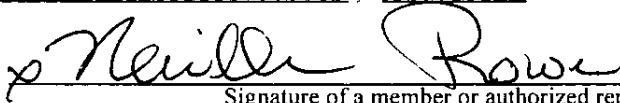
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
N/A	N/A	N/A	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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HARRIS COUNTY, TEXAS

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

N/A

Dated July 29th, 2013



Signature of a member or authorized representative of a member

Nevelle Rowe

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

CLERK OF DISTRICT COURT  
JULY 29 2013

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