

LL3 000139540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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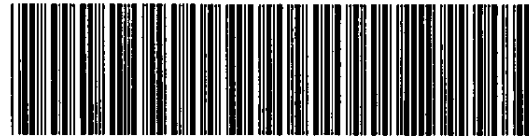
(Business Entity Name)

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TALLAHASSEE, FLORIDA

OCT 30 2013

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rum Crums 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:

Meisha Donaldson
Name of Person

Rum Crums LLC.
Firm/Company

3101 Port Royale Blvd # 831
Address

Fort Lauderdale FL 33308
City/State and Zip Code

rumcrums@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Meisha Donaldson at (954) 793-7018
Name of Person Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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

Bum Crums LLC.
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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

Title	Name	Address	Type of Action
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MGR	Meisha Donaldson	3101 Port Royale Blvd #831 Fort Fort Lauderdale, FL 33308	☒ Add ☐ Remove
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MGR	Khalia Donaldson	3101 Port Royale Blvd #831 Fort Lauderdale, FL 33308	☒ Add ☐ Remove
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MGR	Albert Donaldson	3101 Port Royale Blvd #831 Fort Lauderdale, FL 33308	☒ Add ☐ Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 12, 2013.



Signature of a member or authorized representative of a member

Khaliq Donaldson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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