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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** VF SKILLED TRADES, 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:

Charles H. Musgrove, Jr.

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2001 Thomasville Rd

\_\_\_\_\_  
Address

Tallahassee, FL 32308

\_\_\_\_\_  
City/State and Zip Code

cmusgrove@beanteam.com

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

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

## Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Accuire LLC	2001 THOMASVILLE RD	<input type="checkbox"/> Add
		TALLAHASSEE, FL 32308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	WILKERSON, ROBERT B	23 LAKE SHORE DR	<input type="checkbox"/> Add
		ST AUGUSTINE, FL 32080	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 30, 2016

Signature

Signature of a member or authorized representative of a member

CHARLES H. MUSGROVE, JR  
Typed or printed name of signer

Typed or printed name of signee