

LI4 000041783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200257891302

03/17/14--01007--023 **25.00

RECEIVED
FEB 17 2014
TALLAHASSEE, FLORIDA
US 13 01 427 91

J. Shivers MAR 20 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **RONDEVU 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:

Ronald C Carstens

Name of Person

Firm/Company

1136 Pineland Ave

Address

Venice, FL 34285

City/State and Zip Code

rcarstens1136@gmail.com

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

For further information concerning this matter, please call:

Ronald Carstens

Name of Person

at (

941 223-4333

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

RONDEVU LLC

Page 1 of 3

MGR = Manager
AMBR = Authorized Member

Page 2 of 3

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 March 13 2014



Signature of a member or authorized representative of a member

Ronald C Carstens

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

RECEIVED
FLORIDA
MARCH 19 2014