

L140000 84808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

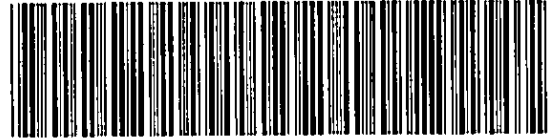
(Business Entity Name)

(Document Number)

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FEB 07 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Island Remodeling, 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:

Joshua M. Entin
Name of Person

Entin Law Group LLC
Firm/Company

633 S Andrews Ave, Ste 500
Address

Ft. Lauderdale, FL 33301
City/State and Zip Code

mherman772@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jonika H Entin at (305) 542-3445
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Island Remodeling LLC

The Articles of Organization for this Limited Liability Company were filed on May 27, 2014 and assigned Florida document number L14000084808.

11A

N/A

N/A

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	Carmen Hernandez	17460 SW 35 th Court	<input checked="" type="checkbox"/> Add
		Miramar, FL 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2/1/18

N/A

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 12/19/19.


Signature of a member or author

Signature of a member or authorized representative of a member

Typed or printed name of signee