

115000005789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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S Warren

DEC 23 2016

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: All American Renovations, 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:

Todd Ferrigno  
Name of Person

All American Renovations LLC  
Firm/Company

655 N Clermont Rd  
Address

Venice, FL 34292  
City/State and Zip Code

Todd3116@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd Ferrigno at (941) 504-1117  
Name of Person 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

All American Renovations, LLC

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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>                      |
|--------------|-----------------|-------------------------|--|
| 10% owner    | Chad Williamson | 5719 Brooklyn Ave       | <input type="checkbox"/> Add               |
|              |                 | Sarasota, FL 34231      | <input checked="" type="checkbox"/> Remove |
|              |                 |                         | <input type="checkbox"/> Change            |
| 10% owner    | Robert Edwards  | 226 Seminole Blvd. NW   | <input type="checkbox"/> Add               |
|              |                 | PT. Charlotte, FL 33952 | <input checked="" type="checkbox"/> Remove |
|              |                 |                         | <input type="checkbox"/> Change            |
|              |                 |                         | <input type="checkbox"/> Add               |
|              |                 |                         | <input type="checkbox"/> Remove            |
|              |                 |                         | <input type="checkbox"/> Change            |
|              |                 |                         | <input type="checkbox"/> Add               |
|              |                 |                         | <input type="checkbox"/> Remove            |
|              |                 |                         | <input type="checkbox"/> Change            |
|              |                 |                         | <input type="checkbox"/> Add               |
|              |                 |                         | <input type="checkbox"/> Remove            |
|              |                 |                         | <input type="checkbox"/> Change            |
|              |                 |                         | <input type="checkbox"/> Add               |
|              |                 |                         | <input type="checkbox"/> Remove            |
|              |                 |                         | <input type="checkbox"/> Change            |

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

Please show Todd Ferrigno as "Title Owner"  
as it shows for Christopher Padilla as they  
are equal owners. Currently it shows Todd  
as a manager and that need to show owner.  
Thank you.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 12 / 19, 2016.



Signature of a member or authorized representative of a member

TODD FERRIGNO

Typed or printed name of signee

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