

L150000 22627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

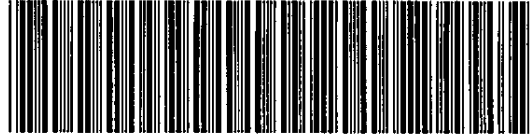
(Business Entity Name)

(Document Number)

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STATE OF TEXAS
SECRETARY OF STATE

APR 14 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zerber Concrete Construction 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:

Joe. W Zerber
Name of Person

Zerber Concrete Construction LLC
Firm/Company

1280 Mahogany Mill Rd Apt 5
Address

Pensacola, FL 32507
City/State and Zip Code

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

For further information concerning this matter, please call:

Joe. W Zerber at (850) 453 9384
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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
mGR	Joe Zerber	PO Box 13172	<input checked="" type="checkbox"/> Add
		Pensacola FL 32591	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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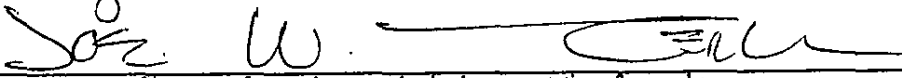
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 February 27, 2015.



Signature of a member or authorized representative of a member

Joe W. Zerber

Typed or printed name of signee

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STATE OF FLORIDA