

LP00005027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

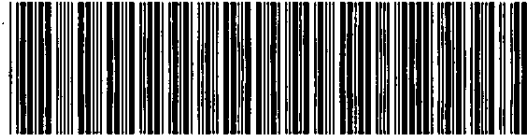
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

no app 730

Office Use Only



300281061903

300281061903
01/19/16--01030--017 **25.00

FILED
16 JAN 19 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 22 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 21, 2016

LAWRENCE ADKINS
12537 MAGNOLIA COVE COURT
CLERMONT, FL 34711

SUBJECT: LARM ENTERPRISES, LLC.
Ref. Number: L15000050027

RECEIVED
2016 FEB 22 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for LARM ENTERPRISES, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 816A00001404

Please find attached.

FILED
16 JAN 19 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LARM Enterprises, 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:

Lawrence Adkins

Name of Person

LARM Enterprises, LLC

Firm/Company

12537 Magnolia Cove Court

Address

Clermont, FL 34711

City/State and Zip Code

adkinslarry23@yahoo.com

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

For further information concerning this matter, please call:

Lawrence Adkins

561
at ()

699-0883

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

FILED
16 JAN 19 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 1 of 3

SECRETARY OF STATE
WASHINGTON, D.C.
16 JUN 19 4:56
FILED
under the name of the n

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	Robert Moon	9642 Bear Lake Road	<input checked="" type="checkbox"/> Add
		Apopka, FL 32703	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 16
 JAN 1
 PM 1:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

16 JAN 19 PH 4
SOCIETY OF ST
TALL MARBLE, 110

16 JAN 19 PM 4:56
SOCIETY OF STATE
TALLAHASSEE, FLORIDA

(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee