

45000162950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

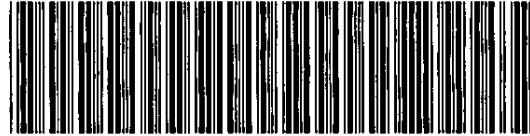
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 09 2015

G. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: U.S. Land Solutions, 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:

Karen B Hill

Name of Person

U.S. Land Solutions, LLC

Firm/Company

11924 Fairway Lakes Dr, Suite 1

Address

Fort Myers, FL 33913-8434

City/State and Zip Code

khill@mvecci.com

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

For further information concerning this matter, please call:

Karen B Hill, Registered Agent

239

989-5278

at ()

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

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U.S. Land Solutions, LLC

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	William H Baird	11924 Fairway Lakes Dr.	<input type="checkbox"/> Add
		Suite 1	<input type="checkbox"/> Remove
		Fort Myers, FL 33913	<input checked="" type="checkbox"/> Change
AR	Karen B Hill	11924 Fairway Lakes Dr	<input type="checkbox"/> Add
		Suite 1	<input type="checkbox"/> Remove
		Fort Myers, FL 33913	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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.

Karen B Hill, Registered Agent, AR
Signature of a member or authorized representative of a member

Karen B Hill, Registered Agent, AR

Typed or printed name of signee