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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

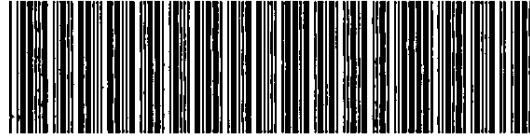
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/26/16

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

SUBJECT: Amy F. Wilson, Real Estate Specialist, 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:**

Amy F. Wilson

Name of Person

Firm/Company

316 Arpieka Avenue  
Address

## Address

St. Augustine, Fl. 32003

City/State and Zip Code

gatoramy@aol.com  
(address: (to be used for future annual report notification))

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

**For further information concerning this matter, please call:**

Amy F. Wilson

Name of Person

at (904) 333-2196

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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Amy F. Wilson, Real Estate Specialist, LLC.  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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>
			<input type="checkbox"/> Add
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**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.

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

Signature of a member or authorized representative of a member

Amy F. Wilson  
Typed or printed name of signer