

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.
 Account Number : 120010000062
 Phone : (323) 962-8600
 Fax Number : (323) 962-3889

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SALT LIFE REDECKING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
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Corporate Filing Menu

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COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: SALT LIFE REDECKING, 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/State and Zip Code

MDuncan@CoastSeawall.com

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

For further information concerning this matter, please call:

Imelda Vasquez

at (800)

773-0888 ext. 9724

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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MGR = Manager
AMBR = Authorized Member

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

Article IV. Please update address for AMBR Kenneth M. McInnis to:

6382 Rosewood Drive, Englewood, Florida 34224

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 MAY 26th, 2016.



Signature of a member or authorized representative of a member

Kenneth M. McInnis

Typed or printed name of signee

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