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TALLAHASSEE, FLORIDA

S Warren

JUL 19 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GULF ATLANTIC DESIGN 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:

MARY KELLEY ZAJACZKOWSKI

Name of Person

Firm/Company

759 100TH AVE N

Address

NAPLES, FL 34108

City/State and Zip Code

MARYKELLEY22@GMAIL.COM

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

For further information concerning this matter, please call:

MARY KELLEY ZAJACZKOWSKI

239 919-4584
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

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>
MGR	MARY KELLEY ZAJACZKOWSKI		☒ Add
			☐ Remove
			☐ Change
MGR	MARY KELLY ZAJACZKOSKI		☐ Add
			☒ Remove
			☐ Change
			☐ Add
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OFFICE OF FLORIDA

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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.

Dated JULY 12, 2016

X  Signature of a

Signature of a member or authorized representative of a member

MARY KELLEY ZACACZKOWSKI

Typed or printed name of signee

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