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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 02 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ready Set Swim Pool and Spa Services 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:

Charles S. Hanson

Name of Person

Ready Set Swim Pool and Spa Services LLC.

Firm/Company

4680 Camp Creek Lane

Address

Orange Park FL 32065

City/State and Zip Code

ReadysetswimLLC@gmail.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Hanson

Name of Person

at (904)

Area Code

535-4965

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Ready Set Swim Pool and Spa Services 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>
AMBR	Mary Hanson	4680 Camp Creek Lane	<input checked="" type="checkbox"/> Add
		Orange Park Fl 32065	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

FILED
2006 NOV -1 4 3 16
CLERK OF THE COURT
IN THE DISTRICT COURT OF THE
STATE OF FLORIDA
JANUARY 1, 2006
Pursuant to 605.020
F.S., this document
will not be listed as
a public document
in the earlier

Dated 10/26, 2016

Signature of a member or authorized representative of a member

Charles Hanson Mary Hanson
Typed or printed name of signer