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(Address)

(Address)

(City/State/Zip/Phone #)

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D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: and residential
Pro's Commercial painting and repair 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:

Hassie White

Name of Person

Pro's Commercial and residential painting and repair Services, LLC
Firm/Company

737 Hwy 22, Wewahitchka, FL 32465
Address

Wewahitchka FL 32465
City/State and Zip Code

hassiewhite@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hassie White at (850) 833-0771
Name of Person Area Code Daytime Telephone Number

SECRETARY OF STATE
16 NOV - 9 PM 2:18

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

Pro's Commercial and residential painting and repair 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	Christopher Clagborn	737 Hwy 22, Wewahatcha, FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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.

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.

Dated

November 8, 2016

[Handwritten signature]

Signature of a member or authorized representative of a member

Hassie White

Typed or printed name of signee