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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

N COOPER

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Geiger Painting Professionals, 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:

Jessica Wise

\_\_\_\_\_  
Name of Person

Geiger Painting Professionals, LLC

\_\_\_\_\_  
Firm/Company

45 Seaside Drive

\_\_\_\_\_  
Address

Ormond Beach, FL 32176

\_\_\_\_\_  
City/State and Zip Code

jessica.wise229@gmail.com

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

For further information concerning this matter, please call:

Jessica Wise

386 843-8015  
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

Geiger Painting Professionals, LLC

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>
Vice Pres	Rich Geiger	45 Seaside Drive	<input checked="" type="checkbox"/> Add
		Ormond Beach, FL 32176	<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.)*

FIELD  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 MAY 29 AM 9:07

**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.

Dated April 16, 2018

Signature of a member

Signature of a member or authorized representative of a member

Jessica Wise

Typed or printed name of signee