

L17000116900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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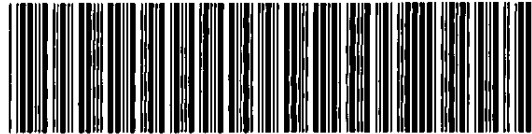
(Business Entity Name)

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06/05/17--01011--012 **25.00

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17 JUN -5 PM 12:31

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17 JUN -5 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

JUN 05 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Miller's Precision Flooring L.L.C.
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:

James Roberts
Name of Person

Firm/Company

658 Spring Creek Hwy
Address

cranfordville FL, 32327
City/State and Zip Code

James.James2002116@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at (_____) _____
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

Miller's Precision Flooring L.L.C.
(Name of the Limited Liability Company as it may appear on our records)

(A Florida Limited Liability Company)

FILED
JUL-5 PM12:43
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA
DISTRICT AGENT

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

(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)

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 6/5/17 _____, _____

7. _____.

Signature of a member or authorized representative of a member

Richard Dean Miller
Typed or printed name of signee

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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17 JUN-5 PM 12:43
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