

4180000 73397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

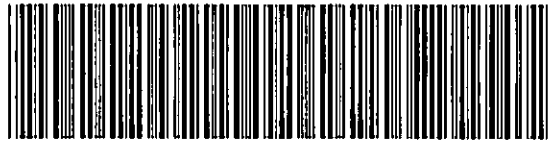
(Business Entity Name)

(Document Number)

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STATE OF TEXAS  
DIVISION OF CLERK OF COURT  
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N COOPER

JUL 16 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Saltwater Remodeling, 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:

Sara Escamilla

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

Saltwater Remodeling, LLC

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

3082 Garden Terrace NE

\_\_\_\_\_  
Address

Palm Bay, FL 32905

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

saltwaterremodel@gmail.com

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

For further information concerning this matter, please call:

Sara Escamilla

321

586-6552

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

Saltwater Remodeling, 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>
MGR	Sayuri Samuel Escamilla	3082 Garden Terrace NE Palm Bay, FL 32905	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Please add Sayuri Samuel Escamilla as 50% part owner and manager of Saltwater Remodeling, LLC

18 JUL 12 AM 9:27  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

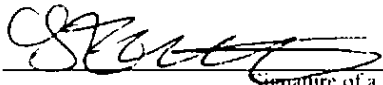
**E. Effective date, if other than the date of filing:** 7/6/2018 **(optional)**

(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 July 6 2018

  
Signature of a member or authorized representative of a member

Sara Escamilla

Sayuri Samuel Escamilla

Typed or printed name of signee



DRIVER LICENSE CLASS 1  
E254-797-87-337-0

DAVID SAMUEL  
8000 W. ALA ALDANA  
5072 GARDEN TER N2  
PALM BAY, FL 32909-0000  
DOB 09-17-1937 SEX M  
EXP 09-11-2016  
EXP 09-17-2016  
A.D.  
EXPIRES

*David Samuel*

DAVID SAMUEL