

L18000094709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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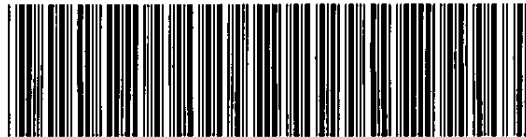
(Business Entity Name)

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APR 23 2018

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: 3D ACKER LIFESTYLE DESIGNS, 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:

MICHAEL DREISSIGACKER
Name of Person

3D ACKER LIFESTYLE DESIGNS, LLC
Firm/Company

241 3/STREET SW
Address

NAPLES, FL 34117
City/State and Zip Code

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

For further information concerning this matter, please call:

MICHAEL DREISSIGACKER at (239) 207-2805
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

30 ACKER LIFESTYLE DESIGNS LLC

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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>
			☐ Add
			☐ Remove
			☐ Change
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FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

4-18-2018

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.

Dated

4-18-2018

Signature of a member or authorized representative of a member

MICHAEL TREISWIGER

Typed or printed name of signee