

118 000 235 375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

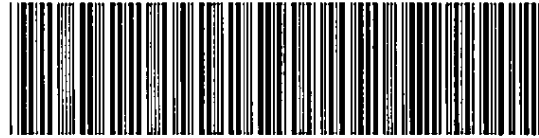
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/26/18--01013--011 **25.00

FILED

2018 OCT 26 PM 11:45

3

11/7/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRUE BUILDERS OF WEST VIRGINIA, 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:

ANDREW M. REED

Name of Person

REED MAWHINNEY & LINK, PLLC

Firm/Company

1611 HARDEN BLVD.

Address

LAKELAND, FL 33803

City/State and Zip Code

ANDY@POLKLAWYER.COM

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

For further information concerning this matter, please call:

ANDREW M. REED

863 687-1771
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2019-07-29 11:46

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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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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2019-01-26 11:46

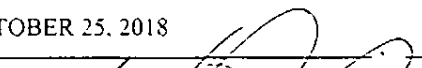
2019-07-26 11:44

(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:

Dated OCTOBER 25, 2018

TOBER 25, 2018



Signature of a member or authorized representative of a member

ANDREW M. REED, AUTHORIZED REPRESENTATIVE

Typed or printed name of signee