

L18000273509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

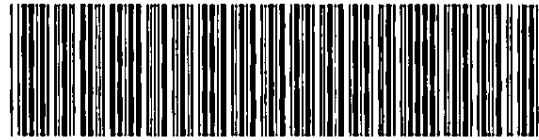
(Document Number)

Certified Copies _____

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2019 APR -9 PM 2:52

Clerk of Court

R. WHITE

APR 16 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MMM FLOORING TILE 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:

MARCIO M MORAES

Name of Person

MMM FLOORING TILE LLC

Firm/Company

89 BERWICK CIRCLE

Address

SHALIMAR, FL 32579

City/State and Zip Code

mmmoraes@yahoo.com.br

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

For further information concerning this matter, please call:

MARCIO M MORAES

386 586.9337
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

FILED

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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	MARCIO M MORAES SR	89 BERWICK CIRCLE	<input type="checkbox"/> Add
		SHALIMAR, FL 32579	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARCIO M MORAES	89 BERWICK CIRCLE	<input checked="" type="checkbox"/> Add
		SHALIMAR, FL 32579	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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