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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2020

KYLE JOSEPH TAYLOR 24 ISHIE AVE BRONSON, FL 32621

SUBJECT: A.M. CONSTRUCTION & MORE LLC

Ref. Number: L2000025149

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE ATTACHED STATEMENT OF CORRECTION AND RESUBMIT TO ADD AN AUTHORIZED PERSON.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 420A00023610

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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ст: <u>Д</u>	1 Construction	HONE Name of Limited Liab	ility Company	
Dear Si	r or Madam:				
The enc	closed Statemen	t of Correction and fee(s) a	are submitted for filin	g.	
Please r	eturn all corres	pondence concerning this i	matter to the following	g:	
	Kyle	Joseph Tay Name of Person	OY	-	
	AH Lo	NSTRUCTION 4 M. Firm/Company	one	-	
24 1 Shie Are Address					
Bronson FL 30601					
Bronson FL 307001 City/State and Zip Code KFZ02920@gmail. Com					
E-		to be used for future annua		-	
For further information concerning this matter, please call:					
_ K	Yle J.	Taylor of Person	at (35 Z Area Code	Daytime Telephone Number	
	Mailing Adda Registration Division of P.O. Box 61 Tallahassee	Section Corporations 327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:					
□\$25 F	Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ S60 Filing Fee. Certificate of Status & Certified Copy	

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: The Florida Document number of the limited liability company is: \(\begin{align*}\begin{align*}\limits & \limits & \ SECOND: Huthry 2001 THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected Jone" on Authorized <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. Signature of Authorized Representative Date Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

\$25.00

Certified Copy: \$30.00 (optional)