

L200000311272

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FL

12/2/20

[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Chillura Auto Sales 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:

Terry R Chillura

Name of Person

Chillura Auto Sales LLC

Firm/Company

6116 Land O Lakes Blvd.

Address

Land O Lakes FL 34368

City/State and Zip Code

chillura@aol.com

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

For further information concerning this matter, please call:

Terry R Chillura

813 310 0696
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

CHILLURA AUTO SALES LLC

SECRETARY OF STATE
TALLAHASSEE, FL.

If Changing Registered Agent, Signature of New Registered Agent

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>
Manager	Rowena D Chillura	19221 Gunn Hwy. Odessa Fl. 33556	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	Terry R Chillura	6116 Land O Lakes Blvd. Land O Lakes FL. 34638	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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: (b) The 90th day after the record is filed.

Jerry R. Chiles
Signature of a member or authorized representative of a member

Typed or printed name of signee