

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**L22000017746**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H22000170655 3)))



H220001706553ABC

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**STRUTHERS MARINA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

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>
MBR	EUGENE STRUTHERS	761 Anclole Road	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Change
MBR	TONDA STRUTHERS	761 Anclole Road	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Change
MBR	SHANE STRUTHERS	761 Anclole Road	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Change
MBR	DAVID PENNINGTON	761 Anclole Road	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Tarpon Springs, FL 34689	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(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) this date will not be listed as the effective date of the filing.

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.

Typed or printed name of signee

**Filing Fee: \$25.00**