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(Address)

(Address)

(City/State/Zip/Phone #)

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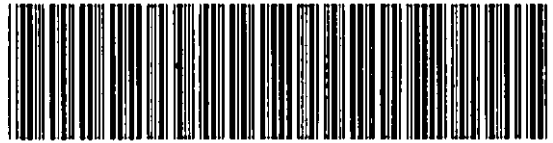
(Business Entity Name)

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2022 MAY 13 AM 9:28
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TALLAHASSEE, FL

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Old Oak Truss Design, 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:

Michael D LaBarbera

Name of Person

LaBarbera and Campbell Attorneys at Law

Firm/Company

13309 Winding Oak Ct. - Suite B

Address

Tampa, FL 33612

City/State and Zip Code

mdlabarbera@aol.com

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

For further information concerning this matter, please call:

Michael D LaBarbera

813 251-1940

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

~~SECRETARY OF STATE~~
TALLAHASSEE, FL

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

287 MAY 13 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FL

2877 MAY 13 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FL

113

(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.

Dated May 9, 2022

Mark C. B.

Signature of a member or authorized representative of a member

Michael D LaBarbera Attorney for Member

Typed or printed name of signee

Filing Fee: \$25.00