

L23 000 173 506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

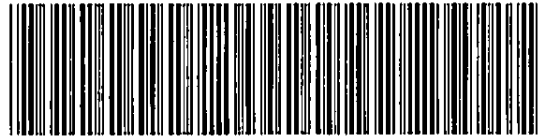
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 APR 24 04:10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LCFI MAINTENANCE 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:

FRANK PEDROSO
Name of Person

LCFI MAINTENANCE LLC
Firm/Company

452 CINNABON DR KISSIMMEE FL 34759
Address

City/State and Zip Code

~~FRANK PEDROSO~~ FRANKIE PEDROSO@ICLOUD.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANK PEDROSO at (732) 604-1202
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

LCFI maintenance LLC

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>
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OWNER	FRANK PEDROSO	452 CINNABON DR	<input type="checkbox"/> Add
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		KISSIMEE FL 34759	<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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MGR	FRANK PEDROSO	452 CINNABON DR	<input checked="" type="checkbox"/> Add
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		KISSIMEE FL 34759	<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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MGR	CONSTANCE	452 CINNABON DR	<input type="checkbox"/> Add
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CAMMARATA

		KISSIMEE FL 34755	<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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SECRET
711

Filing Fee: \$25.00