

L24 0000 58289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

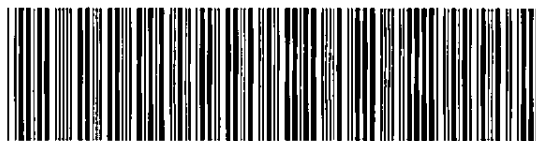
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/08/24--01024--004 ♦♦25.00

2024 APR -3 PM 2:40

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Auto & Tire Bay Services
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:

Joel Rosa
Name of Person

Auto & Tire Bay Services
Firm/Company

7106 W. Creek Drive
Address

Tampa, FL 33615
City/State and Zip Code

service@autoandtireservice.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel Rosa at (813) 585-5582
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

