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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: RV HAND PULL 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:

Hector Parada

Name of Person

RV HAND PULL LLC

Firm/Company

803 West Socrum Loop Rd

Address

Lakeland, FL 33809

City/State and Zip Code

rvhandpull@gmail.com

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

For further information concerning this matter, please call:

Hector Parada

863

688-8641

Name of Person

at ()
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

