L24000120350

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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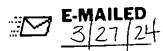


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COVER LETTER



TO: Registration	Section					- '- -
Division of C						
	Boys Pressure Washing, LLC.					
	N	lame of Limited Liab	ility Company	_		
Dear Sir or Madam:						
The enclosed Stateme	ent of Correction and fee(s) a	re submitted for filing	J.			
Please return all corre	espondence concerning this n	natter to the following	;			
Cameron Mastin						
	Name of Person		•			
Water Boys Pressure	Washing, LLC.				21	
·	Firm/Company		•	=	024 H	~27 ⁴
1333 Altman Road				-	2024 HAR 27	1 سن
	Address		-		[]	J.
Jacksonville, Florida	32221			rit.	AM II	
	City/State and Zip Code		-	717	AM 10: 39	
waterboys3020@out	look.com				•	
E-mail address:	(to be used for future annual	report notification)	-			
For further information	on concerning this matter, ple	ease call:				
Cameron Mastin	•	904	302-1520			
Na	me of Person	at (Daytime Telephone Number	-		
Division of P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	e 810		
Enclosed is a check	for the following amount:					
□\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy			

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		ame of the limited liability company is: Water Boys Pressure Washing, LLC.	
SECO		The Florida Document number of the limited liability company is: L24000120350 Document to be corrected is: Gast Date	
THIRE	<u>)</u> :	Document to be corrected is: 77047 Doc 6	
A	Conta	CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Lins an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected ment are as follows: A CAMERON MASTIN AS Manager.	
0		defectively signed. The manner in which the document was defectively signed and the appropriate correction at lows:	ге
		lectronic transmission of the record was defective. Signature of Authorized Representative Date	
		ew registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sig designation).	n
l hereb provision obligat reflect (y acceptions of a	cd Agent's Signature, if changing Registered Agent: of the appointment as registered agent and agree to act in this capacity. I further agree to comply with the all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to mere ge in the registered office address. I hereby confirm that the limited liability company has been notified in writing. Registered Agent's Signature	ly
		Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

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