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(M)

(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

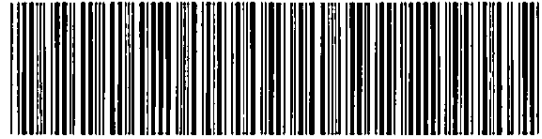
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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GENESIS GLOBAL CONTRACTORS 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:

CARLOS A CARDONA

Name of Person

GENESIS GLOBAL CONTRACTORS LLC

Firm/Company

6976 HAMMOCK LAKES DR

Address

MELBOURNE, FL 32940

City/State and Zip Code

carlos@genesishglobalcontractors.com

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

For further information concerning this matter, please call:

CARLOS A CARDONA

321

544-8664

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

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>
MGR	KEVIN DARDANO	436 WINDSAIL CIRCLE	<input type="checkbox"/> Add
		ROCKLEDGE, FL 32955	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JAMES M CAMPBELL	3156 BOARDWALK TRAIL	<input type="checkbox"/> Add
		MELBOURNE, FL 32940	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KARL CHIWIWI	05 TR 08	<input checked="" type="checkbox"/> Add
		BOSQUE FARMS, NM 87068	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00