

MO6000003067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

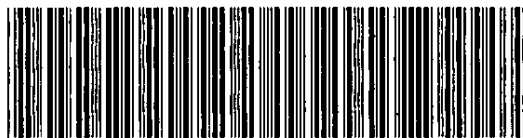
MO6-3067

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Everlast Renovating & Restoration Services L.L.C.
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:

Ronald B. DeHaven
Name of Person

Everlast Renovating & Restoration Services L.L.C.
Firm/Company

408 S. Willow Ave
Address

Port Orange FL 32127
City/State and Zip Code

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

For further information concerning this matter, please call:

Ronald B. DeHaven at (810) 523 4052
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 23, 2009

RONALD B. DEHAVEN
408 S. WILLOW AVENUE
PORT ORANGE, FL 32127

SUBJECT: EVERLAST RENOVATING & RESTORATION SERVICES L.L.C.
Ref. Number: M06000003067

We have received your document for EVERLAST RENOVATING & RESTORATION SERVICES L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 009A00031139

FILED

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AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Everlast Renovating + Restoration Services L.L.C.
2. This entity was formed under the laws of: Florida
3. This entity was authorized to transact business in Florida on _____
and its Florida document/registration number is MO6000003067
4. The name and address of each manager or managing member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

~~Please Add as Member~~

mgrm

~~Managing member~~

Dennis Hawkins

3537 Forest Branch Dr.

Port Orange, FL 32129

Apt C

Required Signature: Ronald B. DeHaven

Signature of Manager, Managing Member or Member

Filing Fee: \$25