

MD80000003228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SEVENTH JUDICIAL STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THOROUGHSCAPE HOLDINGS, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS A GRIFFITH
(Name of Person)

THOROUGHSCAPE HOLDINGS, LLC
(Firm/Company)

3501 S.W. 126th Ave
(Address)

MIRAMAR, FL 33027
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas A Griffith at (954) 326-8910
(Name of Person) (Area Code and Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E123(8/07)

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: THOROUGHSCAPE HOLDINGS, LLC

2. This entity was formed under the laws of: NEVADA

3. This entity was authorized to transact business in Florida on JULY 9, 2008
and its Florida document/registration number is M08000003228

4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

THOMAS A GRIFFITH
3501 S.W. 126TH AVE
MIRAMAR, FL 33027

MGRM

CYNTHIA E GRIFFITH
2050 WINDSOCK WAY
WELLINGTON, FL 33414

Required Signature: _____

(Signature of Manager, Managing Member or Member)

Filing Fee: \$25

08 DEC 15 AM 8:45
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED