

H19000357351
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

* Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. *

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALL WIRE CONSTRUCTION SOLUTIONS LIMITED
LIABILITY CO**

Certificate of Status	0
Certified Copy	1
Page Count	06
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2019 DEC 11 PM 2:57

TALLAHASSEE FLORIDA

2019 DEC 11 PM 1:49
STATE
TALLAHASSEE FLORIDA

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DEC 11 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL WIRE CONSTRUCTION SOLUTIONS LIMITED LIABILITY COMPANY
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:

Cheyenne Moseley

 Name of Person

Legalzoom.com, Inc.

 Firm/Company

101 N Brand Blvd 11th Fl

 Address

Glendale, CA 91203

 City/State and Zip Code

Phyclair70@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

 Name of Person

at (800) 773-0888

 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

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>
AMBR	Francis Cavanna	106 Paddock Rd	<input type="checkbox"/> Add
		Rutland, MA 01543	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Peter Cavanna	106 Paddock Rd	<input type="checkbox"/> Add
		Rutland, MA 01543	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

