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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Rome G Capital 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:

Gary B. Rome

Name of Person

Rome G Capital LLC

Firm/Company

11045 River Creek Drive East

Address

Jacksonville, FL 32223

City/State and Zip Code

gary.rome@lpl.com

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

For further information concerning this matter, please call:

Gary Rome

Name of Person

at **904 260-5073**

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

Rome G Capital LLC

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
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_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove

ALL AMENDMENTS TO ORIGIN
14 JUN 26 PM 2 33
11 11 11

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 23, 2014



Signature of a member or authorized representative of a member

Gary B. Rome

Typed or printed name of signee

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Filing Fee: \$25.00

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