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TALLAHASSEE, FLORIDA

D. BRUCE

NOV 2 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pine Holdings, 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:

Debbe R. Chalifoux
Name of Person

Pine Holdings, LLC
Firm/Company

365 Taft-Vineland Rd., Suite 105
Address

Orlando, FL 32809
City/State and Zip Code

Debsker1@aol.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Debbe R. Chalifoux at (407) 908-5732
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

Pine Holdings, LLC

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

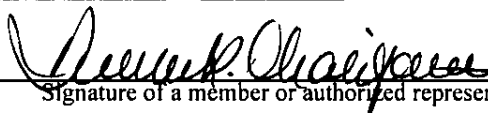
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Beverly B. Madison	6545 Cay Circle Orlando, FL 32809	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated January 1, 2009.



Signature of a member or authorized representative of a member

Debbe R. Chalifoux

Typed or printed name of signee

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