

11/10/2011 18:12

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EMPIRE CORP KIT

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Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000268659 3)))



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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****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
MOUNT VERNON, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

B. BOSTICK

NOV 15 2011

EXAMINER

11/10/2011

H 11000 268 659

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOUNT VERNON, 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:

MARIO GUZMAN

Name of Person

GUZMAN & GUZMAN, P.A.

Firm/Company

9130 S. DADELAND BLVD, STE 1600

Address

MIAMI, FL 33156

City/State and Zip Code

MGUZMAN@GUZMANANDGUZMAN.COM

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

For further information concerning this matter, please call:

MARIO GUZMAN

Name of Person

at (305)

670-1991

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

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EMPIRE CORP KIT

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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

Title	Name	Address	Type of Action
MGRM	Marta Ruth Kolman	9601 Collins Ave # 1105 Bai Harbour, FL 33154	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Daniel E Berkenstadt	9601 Collins Ave # 1105 Bai Harbour, FL 33154	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
PST	Daniel E Berkenstadt	9601 Collins Ave # 508 Bai Harbour, FL 33154	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated November 8, 2011

Signature of a member or authorized representative of a member

DANIEL E. BERKENSTADT

Typed or printed name of signer

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