



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State

01-24-2005 90105 017 ****75.00

DOCUMENT # L03000049957 1. Entity Name PAUL CLECKNER COMMUNICATION, LLC					
Principal Place of Business 449 BARNES ROAD MONTICELLO, FL 32344 US			Mailing Address 449 BARNES ROAD MONTICELLO, FL 32344 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CLECKNER, PAUL 449 BARNES ROAD MONTICELLO, FL 32344				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005				Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLECKNER, PAUL 449 BARNES ROAD MONTICELLO, FL 32344 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 			01/21/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

30000550



01212005 Chg-LLC CR2E083 (10/03)

4. FEI Number **20-0450753** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ATTACHMENT
50000550

PAUL CLECKNER COMMUNICATIONS LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on DECEMBER 4, 2003 and assigned
document number L03000049957.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited
liability company:

The entity name Paul Cleckner Communication, LLC shall be changed and amended to be Paul Cleckner LLC

Dated JANUARY 21, 2005



Signature of a member or authorized representative of a member

PAUL CLECKNER, MGR

Typed or printed name of signee

Filing Fee: \$25.00