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TO:	Registration Section	
	Division of Corporations	

Pearl Dental IIC (Name of Limited Liability Company) SUBJECT:

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James C. Brunnelt (Name of Person)	
Pearl Dental IIC (Firm'Company)	
111 4th St	
(Address)	
Apalachicola, FL 32320 (City/State and Zip Code)	

For further information concerning this matter, please call:

Jaimes C. Brummett at 850 653-8845 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pearl (A Florida Limited Liability Company) 2005 The Articles of Organization were filed on _____ document number Lo560003329_and assigned FIRST: SECOND: This amendment is submitted to amend the following: Address: Registered Haent Apalachicola, FL 32320 ЧЬ S, 8845 50 65 ailing Apalachicola, FL 32320 Чt October ,2005 Dated 0500 20 Signature of a member or authorized representative of a member PH 1 51 James Brummett Typed or printed name of signee С

Filing Fee: \$25.00