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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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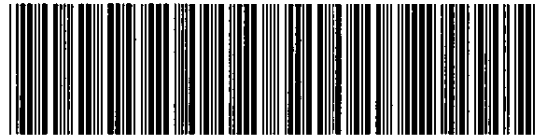
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 29 PM 1:56

T. HAMPTON

DEC 30 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BARAKAT, PREMPEH & JACOBS, P.L.
(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:

BRIAN BARAKAT

(Name of Person)

BARAKAT JACOBS & ASSOCIATES, P.L.

(Firm/Company)

169 EAST FLAGLER STREET SUITE 1640

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN BARAKAT

(Name of Person)

at (305) 350-5055

(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

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

Title	Name	Address	Type of Action
MGRM	PREMPEH PA	1700 NORTH BAY ROAD	☐ Add
		APT. 1212	☒ Remove
		SUNNY ISLES, FL 33160	☐
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

Dated 12/22, 2008.



Signature of a member or authorized representative of a member

BRIAN BARAKAT

Typed or printed name of signee

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