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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

OCT 4 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAKOTACO, 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:

Libo B. Fineberg

Name of Person

Law Office of Libo B. Fineberg

Firm/Company

3500 Gateway Drive, Suite 201

Address

Pompano Beach, Florida 33069

City/State and Zip Code

libolawyer@gmail.com

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

For further information concerning this matter, please call:

Libo B. Fineberg

Name of Person

at (954) 975-6060
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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>
MGR	Libo B. Fineberg	3500 Gateway Drive, Suite 201	<input checked="" type="checkbox"/> Add
		Pompano Beach, FL 33069	<input type="checkbox"/> Remove
MGR	William N. Kale	2940 N Course Dr, Apt 307	<input checked="" type="checkbox"/> Add
		Pompano Beach, FL 33069-3879	<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 9-28, 2010

Libo B. Fineberg
Signature of a member or authorized representative of a member

LIBO B. FINEBERG, MANAGER
Typed or printed name of signee

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