

L 07000017798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

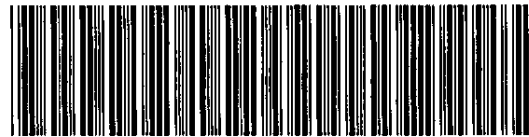
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN 13 2012

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: URI ENTERPRISES 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:

SERGE STROSBERG

Name of Person

URI ENTERPRISES LLC

Firm/Company

130 SUNRISE av. #611

Address

PALM BEACH FL 33480

City/State and Zip Code

strosbergeliane@gmail.com

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

For further information concerning this matter, please call:

ELIA MURIEL STROSBERG at (561) 833 2961

Name of Person

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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TALLAHASSEE, FLORIDA

VRI ENTERPRISES LLC

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

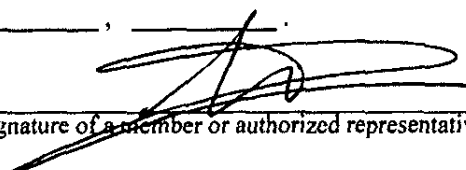
Title	Name	Address	Type of Action
MGR	ARTHUR DONNY STROBERG		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SERGE STROBERG	130 SUNNISE AV. #611 PALM BEACH FL 33480	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MURIEL STROBERG	130 SUNNISE AV. #611 PALM BEACH FL 33480	<input checked="" 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE

Dated \_\_\_\_\_,

  
Signature of a member or authorized representative of a member

\_\_\_\_\_  
Typed or printed name of signee