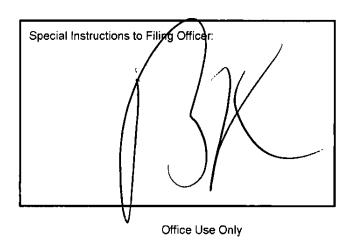
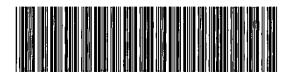
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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT [MAIL
	(Business Entity Name)	
 -,		
	(Document Number)	
Certified Copies	Certificates of State	ıs





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SECRETARY OF STATE ALL AHASSEE FINED.

ATTORNEYS' TIT	ſLE	
Requestor's Name		
1965 Capital Circle NE	Suite A	
Address	, outo / t	
Tallahassee, Fl 32308	850-222-2785	\$55 T. 1
City/St/Zip	Phone #	100 m
- · · / · - · - · /		
		100 PM
		ACCRETATE SECTION
CORPORATION NAME	E(S) & DOCUMENT NUMB	ER(S), (if known):
4		Bir.
1- SERENA INVESTME	NT, LLC	
2-		
3-		
 		
4-		
X Walk-in	Pick-up time ASAP	Certified
Mail-out	Will wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	XXXAmendment	
Non-Profit	Resignation of R.A., Officer/	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICA	TION
Annual Report	Foreign	
Fictitious Name	Limited Partnership	
Name Reservation	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

A SECRETARY OF STATE ATTORNEYS' TITLE 1965 Capital Circle NE, Suite A Address Tallahassee, FI 32308 850-222-2785 City/St/Zip CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1- SERENA INVESTMENT, LLC X Walk-in Pick-up time ASAP Certified Mail-out Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit XXXAmendment Non-Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

COVER LETTER

TO: Registration Division of C			
SUBJECT: SERE	ENA INVESTMENT,	LLC	75 01 M
SUBJECT:		nited Liability Company)	
			PSPA P
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Please return all corres	spondence concerning this matte	r to the following:	OTHON PH 1:20
	Erik C. Larsen		·
		(Name of Person)	
	·	(Firm/Company)	
	243 W. Park Aven		
		(Address)	
	Winter Park, FL 32	2789	
	(1	City/State and Zip Code)	
For further information	n concerning this matter, please	call:	
Erik C. Larsen at (at (407) 647-2011 (Area Code & Daytim	
(Nan	ne of Person)	(Area Code & Daytim	ne Telephone Number)
Enclosed is a check for the	ne 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