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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

SEP 24 2010

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: FORBES PUBLIC RELATIONS, 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:

Angella Forbes
Name of Person

Forbes Public Relations, LLC
Firm/Company

1350 Pennsylvania Ave # 101
Address

Miami Beach FL 33139
City/State and Zip Code

angella@forbespr.com / nurdock@forbespr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angella Forbes at (305) 531-8241
Name of Person Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 SEP 23 AM 11:12

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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

Forbes Public Relations, 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:

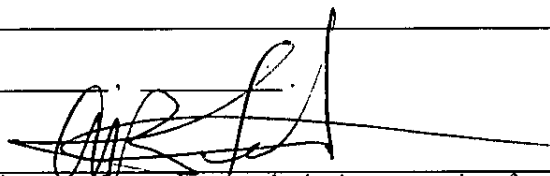
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Shannon Shinn	33715 Sattui St Temecula California 92592	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Murdock Mackenzie	1557 Bay Road Miami Beach FL 33139	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 9/14/10



Signature of a member or authorized representative of a member

Angela Forbes

Typed or printed name of signee