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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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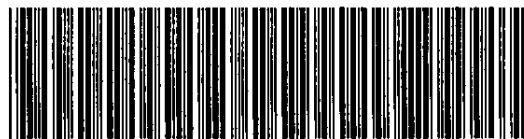
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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D. BRUCE

DEC 12 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bill Cloutier Holdings, 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:

William M. Cloutier

Name of Person

Bill Cloutier, LLC

Firm/Company

9292 Menaggio Ct., Suite 202

Address

Naples, FL 34114

City/State and Zip Code

wmc@billcloutier.com

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

For further information concerning this matter, please call:

Bill Cloutier

Name of Person

at **(904) 746-4629**

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

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>
<u>Mgr</u>	<u>Emily E. Cloutier</u>	<u>9292 Menaggio Ct, Apt 202, Naples, FL 34114</u>	☐ Add
			☒ Remove
<u>Mgr</u>	<u>William J. Cloutier</u>	<u>9292 Menaggio Ct, Apt 202, Naples, FL 34114</u>	☐ Add
			☒ Remove
<u>Mgr</u>	<u>Zachary R. Cloutier</u>	<u>9292 Menaggio Ct, Apt 202, Naples, FL 34114</u>	☐ Add
			☒ Remove
<u>Mgr</u>	<u>Regina A. Cloutier</u>	<u>9292 Menaggio Ct, Apt 202, Naples, FL 34114</u>	☒ Add
			☐ Remove
			☐ Add
			☐ Remove

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

N/A

Dated

12/5, 2012

Signature of a member or authorized representative of a member

William M. Cloutier, Managing Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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