

L080000085358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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08 DEC -2 AM 9:59
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. Tadlock DEC 02 2008

November 26, 2008

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Name Change to Accounts

To Whom it May Concern:

I respectfully request a change to my name as the sole propriety of my LLC as I have recently been married. Please find the attached copy of my marriage license for your reference along with documentation of my LLC from the sunbiz website.

Prior Name: Patricia M Gorter

New Name: Patricia M Sesta

The following is the document number which requires change:

Document Number L08000085358

Thank you in advance for your time and assistance with regards to this matter. Should you have any questions, or require further information, please contact me at 772-408-2358.

Respectfully,



Patricia Sesta
768 SE Seahouse Drive
Port Saint Lucie, FL 34983

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC -2 AM 9: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 DEC -2 AM 8: 00

RECEIVED

STATE OF FLORIDA

MARRIAGE RECORD

TYPE IN UPPER CASE

USE BLACK INK

This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

(STATE FILE NUMBER)

INSTR # 2116718
OR BK 02360 PG 2166

Pg 21667 (1pg)

RECORDED 11/19/2008 09:27:59 AM

MARSHA EWING

CLERK OF MARTIN COUNTY FLORIDA

RECORDED BY C Burkey

08-000765

(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last) JOEY PAUL SESTA			2. DATE OF BIRTH (Month, Day, Year) [REDACTED]	
3a. RESIDENCE - CITY, TOWN, OR LOCATION PT ST LUCIE	3b. COUNTY ST LUCIE	3c. STATE FLORIDA	4. BIRTHPLACE (State or foreign Country) NEW YORK	
5a. BRIDE'S NAME (First, Middle, Last) PATRICIA MARIE GORTER			5b. MAIDEN SURNAME (if different) [REDACTED]	
7a. RESIDENCE - CITY, TOWN, OR LOCATION PT ST LUCIE	7b. COUNTY ST LUCIE	7c. STATE FLORIDA	8. BIRTHPLACE (State or foreign Country) WI	

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE FOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink) 	12. SIGNED AND SWORN TO BEFORE ME ON (DATE) 10/10/2008
10. TITLE OF OFFICIAL DEPUTY CLERK	13. SIGNATURE OF OFFICIAL (Use black ink)
11. SIGNATURE OF BRIDE (Sign full name using black ink) 	14. SIGNED AND SWORN TO BEFORE ME ON (DATE) 10/10/2008
15. TITLE OF OFFICIAL DEPUTY CLERK	15. SIGNATURE OF OFFICIAL (Use black ink)

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE MARTIN	18. DATE LICENSE ISSUED 10/10/2008	18a. DATE LICENSE EFFECTIVE 10/13/2008	19. EXPIRATION DATE 12/09/2008
20a. SIGNATURE OF COURT CLERK OR JUDGE 		20b. TITLE CLERK OF CIRCUIT COURT	20c. BY

CERTIFICATE OF MARRIAGE

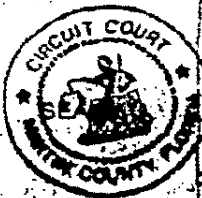
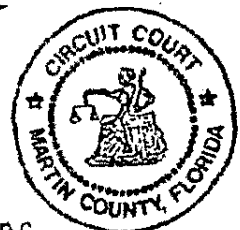
I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) November 13 th 2008	22. CITY, TOWN, OR LOCATION OF MARRIAGE Cape Canaveral, Florida
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) 	23b. ADDRESS (Of person performing ceremony) 2000 Market St. Jacksonville, FL 32208
23c. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary license) MARY E. CLARK JONES MY COMMISSION # DO 394810 EXPIRES: February 9, 2009 Revised This Federal Notary Service	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) 	

STATE OF FLORIDA
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.
MARSHA EWING, CLERK

BY
DATE: 11/24/08 D.C.



MARY E. CLARK JONES
MY COMMISSION # DO 394810
EXPIRES: February 9, 2009
Revised This Federal Notary Service