

LD80000090159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

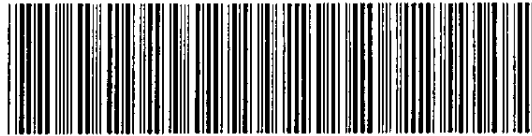
Special Instructions to Filing Officer:

L. SELLERS

NOV 24 2010

EXAMINER

Office Use Only



300184817513

11/23/10--01007--008 **263.75

FILED
13 NOV 23 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PEB CARGO SHIPPING 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:

PIERRE R SCOTT
Name of Person

Firm/Company

2548 SW MARSHFIELD CT
Address

PORT-ST-LUCIE FL 34953
City/State and Zip Code

PIERRESCOTT@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PIERRE R SCOTT at (954) 668-7214
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- + 238.75
- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2010

PIERRE R. SCUTT
2548 SW MARSHFIELD CT
PORT ST LUCIE, FL 34953

SUBJECT: P&B CARGO SHIPPING LLC
Ref. Number: L08000090159

We have received your document for P&B CARGO SHIPPING LLC and check(s) totaling \$263.75. However, your check(s) and document are being returned for the following:

The enclosed reinstatement application must be completed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 210A00024938

ATTN: LESLIE SELLER

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PEB CARGO SHIPPING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9-23-2008 and assigned
Florida document number 608000090159

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

COMPLETELY DEVOTED CENTER, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2548 SW MARSH FIELD
CT, PORT-ST-LUCIE
FL 34953

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2548 SW MARSH FIELD CT
PORT-ST-LUCIE FL
34953

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

BETTY SCUTT

New Registered Office Address:

2548 SW MARSH FIELD

Enter Florida street address

PORT-ST-LUCIE

City

Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

BScutt

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

BScutt

If Changing Registered Agent, Signature of New Registered Agent

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>
MGR	BETTY SCUTT	2548 SW MARSH FIELD CT FORT. ST. LUCIE FL 34953	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	SCOTT PIERRE R	874 SW 159TH LN PEMBROKE PINES, FL 33027	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	SCOTT FURCIEN	874 SW 159TH LN PEMBROKE PINES, FL 33027	<input type="checkbox"/> Add <input checked="" 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.)

Dated 11-13-2010



Signature of a member or authorized representative of a member

PIERRE R. SCUTT

Typed or printed name of signee