

LO9000015071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

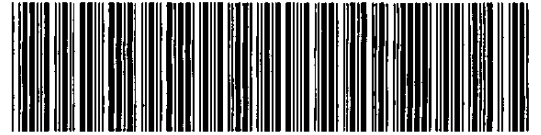
LO9-15071

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES
APR - 3 2009
EXAMINER

Handwritten initials in a circle



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2009

DICK COMBS
5925 RUSSO RD
BARTOW, FL 33830

SUBJECT: CRECENT C BAR CATTLE, LLC
Ref. Number: L09000015071

We have received your document for CRECENT C BAR CATTLE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 409A00011467

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRECENT C BAR CATTLE, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DICK COMBS
(Name of Person)

CRECENT C BAR CATTLE, LLC
(Firm/Company)

5925 RUSSO RD
(Address)

BARTON, FL 33830
(City/State and Zip Code)

For further information concerning this matter, please call:

DICK COMBS at (863) 698-3770
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove

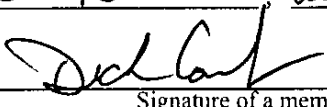
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove

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TALIHASSEE, FLORIDA

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

Dated April 10, 2009


Signature of a member or authorized representative of a member

Dick Combs
Typed or printed name of signee