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(Requestor's Name)

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(Address)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **FLORIDA CONTEMPORARY GROUP, 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:

KENNETH L BROWN CPA CVA

Name of Person

KLBROWN AT TAMPA PALMS

Firm/Company

15255 AMBERLY DRIVE

Address

TAMPA, FL 33647-2155

City/State and Zip Code

KEN@KLBROWN.COM

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

For further information concerning this matter, please call:

KEN BROWN

Name of Person

at (**813**)

978-1040

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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FLORIDA CONTEMPORARY GROUP, 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:

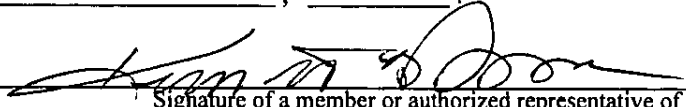
MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	KENNETH L BROWN	15255 AMBERLY DRIVE TAMPA, FL 33647-2155	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AARON BARCELLONA	6832 DUNCASTER ST WINDERMERE, FL 34786	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	JASON VIRMILYA	12930 DROXFORD ROAD WINDERMERE, FL 34786	<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 OCTOBER 19, 2009


 Signature of a member or authorized representative of a member
 KENNETH L BROWN
 Typed or printed name of signee