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T. HAMPTON

SEP - 9 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bottom Line Trading Company, 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 A. Focht

Name of Person

Bottom Line Trading Company, LLC

Firm/Company

3557 Plover Avenue, Unit 5

Address

Naples, Florida 34117

City/State and Zip Code

billfocht@hotmail.com

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

For further information concerning this matter, please call:

William A. Focht

Name of Person

at (239)

398-4733

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

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>
MGRM	Peter J. Havran	3720 25th Avenue SW Naples, FL 34117	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Eric Brophy	5810 Sea Grass Lane Naples, FL 34116	<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

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

N/A

Dated September 3, 2009



Signature of a member or authorized representative of a member

William A. Focht

Typed or printed name of signee

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