10900087120

(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
_	_	_
/Du	rainaga Entity Nam	
(60	isiness Entity Nan	nej
(0		
(1)0	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



500226175055

03/29/12--01011--022 **25.00

CLINE WAY 8 0 2012 EXAMINER

SEERE LARY OF STATE

Approximately and the second s

COVER LETTER

Mark Tourist Control of the Control		
TO: Registration Section Division of Corporations		
	and the second of the second o	
	t Enterprises, LLC	
Name of Limit	ed Liability Company	
Dear Sir or Madam:		
The state of the s		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
rease return an correspondence concerning uns	natter to the following.	
Walter Ronald Duda		
Name of Person		
D 1 4 P 4 1 1 1 1 1 1		
Prescient Enterprises, LLC		
Firm/Company		
8805 Tamiami Trl N Ste# 243	版	
Address		
	in the second	
	FISHER LS	
Naples FL 34108		
City/State and Zip Code	₽m &	
maralissa@comcast.net		
E-mail address: (to be used for future annual report notificate	tion)	
For first to information and an incident at the section of	11.	
For further information concerning this matter, ple	ease cail:	
Maralissa Thomas at (888) 579-0907	
Name of Person .	, Area Code & Daytime Telephone Number	
	•	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following am	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	