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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gellman OCT 20 2009

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Scooter Pro America "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:

**Bradley B Elliott**

Name of Person

**Scooter pro america llc.**

Firm/Company

**1011 s.w 10th Avenue**

Address

**Okeechobee Florida 34974**

City/State and Zip Code

**info@scooterproamerica.com**

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

For further information concerning this matter, please call:

**Brad Elliott**

Name of Person

at ( **863** )

**532-9355**

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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(ds.)

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
mgrm	Ronald B Elliott	1011 s.w 10th Ave. Okeechobee Florida 34974	<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
			<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 \_\_\_\_\_, \_\_\_\_\_.

Bradley B Elliott 10-15-09  
Signature of a member or authorized representative of a member

Bradley B Elliott

Typed or printed name of signee

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