

LD9000 115142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

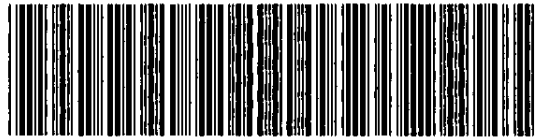
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100167265971

02/23/10--01031--012 **30.00

FILED

2010 FEB 23 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

FEB 24 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gouldard's Grocery Service 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:

Bonnie Carolyn Gouldard
Name of Person

Gouldard's Grocery Service LLC
Firm/Company

1138 S.E. 14th Ave.
Address

Ocala, FL 34471
City/State and Zip Code

bonniecarolyn@embargoemail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bonnie Carolyn Gouldard at (352) 425-6009
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2010 FEB 23 AM 11:06
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Goulard's Grocery Service LLC

Page 1 of 2

FILED
2010 FEB 23 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
MGR	Kyle Douglas Goulard	2707 N.E. 19th Ave. Ocala, Fl. 34470	<input type="checkbox"/> Add <input checked="" 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

2010 FEB 23 AM 11:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

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

The only change is to take off the name
of Kyle Douglas Goulard. He does not want
to be a managing partner of the business.
Thank you.

Dated Feb. 22, 2010.

Bonnie Carolyn Goulard
 Signature of a member or authorized representative of a member

Bonnie Carolyn Goulard
 Typed or printed name of signee