

L10000009551

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
Apr. 20 2010
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PRODAR, 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:

LUIS M. CABRERA
Name of Person

PRODAR, LLC
Firm/Company

335 CARIBBEAN RD.
Address

MIAMI, FL 33149
City/State and Zip Code

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

For further information concerning this matter, please call:

LUIS M. CABRERA at (**305**) **632-0784**
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2010

LUIS M. CABRERA
PRODAR, LLC
335 CARIBBEAN RD.
MIAMI, FL 33149

SUBJECT: PRODAR, LLC
Ref. Number: L10000009551

We have received your document for PRODAR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 610A00007140

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

Prodar, LLC

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|---|--|
| MGRM | LUIS M. CABRERA | 1834 BRICKELL AVE. #32 MIAMI, FL 33129 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGR | LUIS M. CABRERA | 1834 BRICKELL AVE. #32 MIAMI, FL 33129 | <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.)*

Dated February 11th, 2010

X _____
Signature of a member or authorized representative of a member

LUIS M. CABRERA

LUIS M. CABRERA

Typed or printed name of signee

2010 APR 19 PM 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED