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(Business Entity Name)

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EXAMINER



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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR -7 AM 11:34

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CIS Government Services, 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:

Scott P. Swope, J.D.

Name of Person

Swope & Bright, P.L.

Firm/Company

28870 U.S. Highway 19 N., Suite 324

Address

Clearwater, FL 33761

City/State and Zip Code

Scott@SwopeBright.com

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

For further information concerning this matter, please call:

Scott P. Swope, J.D.

Name of Person

at (727)

725-0200

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

CIS Government Services, LLC

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>
MGR	Timothy O'Rourke	1261 S. Missouri Avenue Clearwater, FL 33756	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Craig Gundry	1261 S. Missouri Avenue Clearwater, FL 33756	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Michael O'Connor	1261 S. Missouri Avenue Clearwater, FL 33756	<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

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

Dated 4-6, 10

Scott P. Swope
Signature of a member or authorized representative of a member

Scott P. Swope
Typed or printed name of signee