

L100000060535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

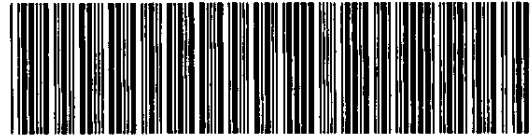
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04/26/13--01021--012 **25.00

J. SAULSBERRY
EXAMINER

APR 30 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UN VENTURES R/E, 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:

LISA CABRERA

Name of Person

VANDEVENTER BLACK LLP

Firm/Company

101 W. MAIN ST. SUITE 500

Address

NORFOLK, VA 23510

City/State and Zip Code

LCABRERA@VANBLK.COM

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

For further information concerning this matter, please call:

LISA CABRERA

Name of Person

at (757) 446-8544

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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UN VENTURES R/E, LLC

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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	Cole Brendan, Inc.	17380 Duneden Ct.	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
MGRM	Gardner Management Consulting, Inc.	17380 Duneden Ct.	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33496	<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

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CLERK OF DISTRICT COURT
NORTH DAKOTA

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

Dated APRIL 23 2013



Signature of a member or authorized representative of a member

Rand E. Shapiro

Typed or printed name of signee

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Filing Fee: \$25.00

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