

# L11000051185

\_\_\_\_\_  
(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



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TALLAHASSEE, FLORIDA

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AND  
FILED

D. BRUCE

DEC 06 2012

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **B's Cool Treats 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:

**Brenda S Zook**

Name of Person

**B's Cool Treats LLC**

Firm/Company

**1051 N Jefferson Ave**

Address

**Sarasota, FL 34237**

City/State and Zip Code

**bscooltreats@gmail.com**

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

For further information concerning this matter, please call:

**Brenda S Zook**

Name of Person

**941 363-0456**

at ( )

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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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          | Barbara J Miller | 1051 N Jefferson Ave | <input type="checkbox"/> Add               |
|              |                  | Sarasota, FL 34237   | <input checked="" type="checkbox"/> Remove |
|              |                  |                      | <input type="checkbox"/> Add               |
|              |                  |                      | <input type="checkbox"/> Remove            |
|              |                  |                      | <input type="checkbox"/> Add               |
|              |                  |                      | <input type="checkbox"/> Remove            |
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FLORIDA  
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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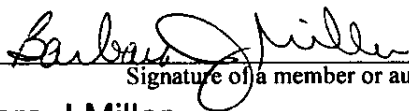
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Dated December 1, 2012



Signature of a member or authorized representative of a member

Barbara J Miller

Typed or printed name of signee

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Filing Fee: \$25.00

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