

L12000026121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

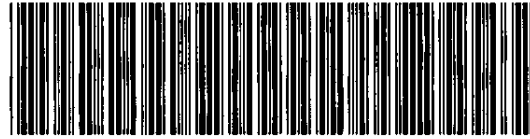
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Bell Construction Company & Consulting, 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:

**Gregory Bell**

Name of Person

**Bell Construction Company & Consulting, LLC**

Firm/Company

**375 Gray Road**

Address

**Melbourne, FL 32904**

City/State and Zip Code

**g.bell@att.net**

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

For further information concerning this matter, please call:

**Gregory Bell**

Name of Person

at **321 508-6722**

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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**BELL CONSTRUCTION COMPANY & CONSULTING, LLC**

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CURRY-BELL, DEBRA S.	375 GRAY ROAD MELBOURNE, FL 32904	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	CURRY-BELL, DEBRA S.	375 GRAY ROAD MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BELL, GREGORY KIRK	375 GRAY ROAD MELBOURNE, FL 32904	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	BELL, GREGORY KIRK	375 GRAY ROAD MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	MARTINEZ, MANUEL	10019 CHORLTON CIRCLE ORLANDO, FL 32832	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	LOCOCO, DAVID	48 TENNESSEE AVENUE MERRITT ISLAND, FL 32953	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

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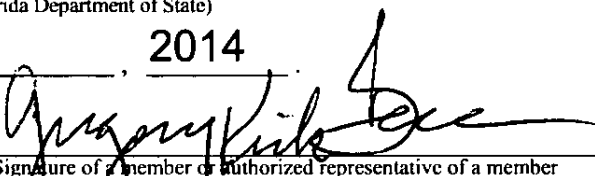
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated **MARCH 19**, **2014**



Signature of a member or authorized representative of a member

**GREGORY KIRK BELL**

Typed or printed name of signee

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