

L12000027059 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

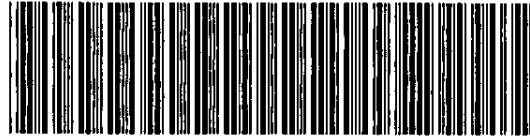
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2013 JUL 26 AM 11:57

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B. BOSTICK  
JUL 29 2013  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:**           Cornett Enterprises 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:

          Kris Cornett            
Name of Person  
          Cornett Enterprises            
Firm/Company  
          17416 Equestrian Tr            
Address  
          Odessa, FL 33356            
City/State and Zip Code  
          Kris.cornett@verizon.net            
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

          Peggy Cornett           at           813 830-2959            
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



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	Ronald <del>Schatzberg</del> <sup>Schatzberg</sup>	P.O. Box 10644 Tampa, FL 33679	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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 TALLAHASSEE, FLORIDA  
 2013 JUL 25 AM 1:58

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

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Dated July 24, 2013, \_\_\_\_\_.

Margaret K. Corbett

Signature of a member or authorized representative of a member

Margaret K. Corbett

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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