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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Advanced Breast Technologies Copnsulting
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:

Arthur G. Lerner, MD
Name of Person
Advanced Breast technologies Consulting
Firm/Company
10428 SW Lands End PL
Address
Palm City, FL. 34990
City/State and Zip Code
aglerner@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arthur G. lerner, MD at (772) 597 0298
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

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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	Beth Bold, RN	709 Church St Marietta, GA 30060	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Beth Boyd, RN	709 Church St, Marietta, GA 30060	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Toni Ann Lerner, RN	10428 SW Lands End PL Palm City, FL 34990	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Richard Fine, MD	709 Church st, Marietta, GA 30060	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MRRM	Richard Fine, MD	6285 Maison Privee Cove, Memphis, TN, 38120	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	William Burak, MD	709 Church St, Marietta, GA 30060	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

Oct 11, 2012



Signature of a member or authorized representative of a member

ARTHUR G. LERNER MD

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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