

L/2000044807

(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:

A. LUNT

MAY 22 2011

EXAMINER

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04/18/12--01015--020 **25.00

FILED
2012 MAY 21 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2012

DAVID L COGSWELL
1744 N DIXIE HWY
FORT LAUDERDALE, FL 33305

SUBJECT: POTTY FRESH PRO LLC.
Ref. Number: L12000044807

FILED
MAY 21 AM 11:24
DIVISION OF STATE
TALLAHASSEE, FLORIDA

We have received your document for POTTY FRESH PRO LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 712A00012236

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: POTTY FRESH PRO 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:

DAVID L COGSWELL

Name of Person

Firm/Company

1744 N DIXIE HWY

Address

FORT LAUDERDALE, FL 33305

City/State and Zip Code

DLMAC1948@YAHOO.COM

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

FILED
2012 MAY 21 AM 10:24
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DAVID L COGSWELL

Name of Person

at (954)

245-8877

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

POTTY FRESH PRO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/02/2012 and assigned
Florida document number L12000044807.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1744 N DIXIE HWY
FORT LAUDERDALE, FL 33305

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1744 N DIXIE HWY
FORT LAUDERDALE, FL 33305

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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:

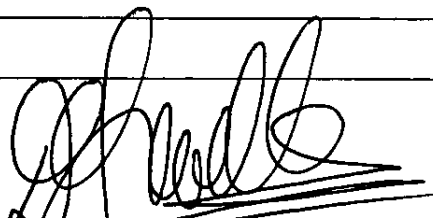
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	DAVID L COGSWELL	1744 N DIXIE HWY FORT LAUDERDALE, FL 33305	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	LEONARD T SPERRY III	1744 DIXIE HWY FORT LAUDERDALE, FL 33305	<input type="checkbox"/> Add <input checked="" 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

360 N. HWY 37
 TALLAHASSEE, FL 32301
 2012 APR 21
 FILED

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

Dated APRIL 12, 2012


 Signature of a member or authorized representative of a member
DAVID LEE COGSWELL
 Typed or printed name of signee

april 27/12