

L12000085574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

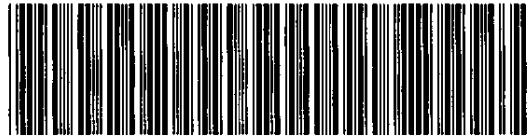
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THE UNITED CARIBBEAN ENTREPRENEURS GROUP, LLC.  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Page 1 of 2

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	NICHEL F HYACINTHE	140 Spruce St. BOYNTON BEACH, FL 33426	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	PHILIPPE DUBOIS	6850 NW 2nd Ave. C25 BOCA RATON, FL 33487	<input checked="" 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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Philippe Dubois

\_\_\_\_\_  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 AUG 20 PM 6:20

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