

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BOYER LAW FIRM, P.L.
Account Number : I20100000071
Phone : (904) 236-5317
Fax Number : (904) 371-3935

Amend

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Office@BoyerLawFirm.comLLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MLCM GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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J. SAULSRERRY
EXAMINER

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2013-09-06 10:31 Boyer Law Firm, P.L.
9/6/13

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Division of Corporations

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Corporate Filing Menu

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RECEIVED
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MLCM Group, 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:

Francis M. Boyer

Name of Person

Boyer Law Firm, PL

Firm/Company

9471 Baymeadows Road, Suite 404

Address

Jacksonville, FL 32256

City/State and Zip Code

Office@BoyerLawFirm.com

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

For further information concerning this matter, please call:

Francis M. Boyer

Name of Person

904 236-5317

at (

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

2013 SEP 6 AM 8:52

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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>
MGR	Marc Lachaine	1 Rue Collin	<input type="checkbox"/> Add
		Boisbriand (Quebec)	<input checked="" type="checkbox"/> Remove
		J7G 1A1, CA	
MGR	Caroline Martel	1 Rue Collin	<input type="checkbox"/> Add
		Boisbriand (Quebec)	<input checked="" type="checkbox"/> Remove
		J7G 1A1, CA	
MGR	MNC Agent-Cy, Inc.	1 Collin Street	<input checked="" type="checkbox"/> Add
		Broasbriad QC J7G 1A1	<input type="checkbox"/> Remove
		Canada	
			<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

Typed or printed name of signer

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Filing Fee: \$25.00

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