

L12000150 857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

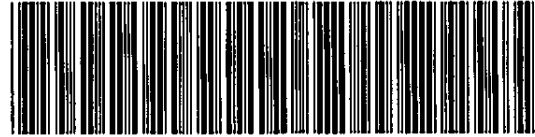
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MAY 15 2015
MAY 15 2015

M. MILLIGAN
EXAMINER

JUN - 2 2015

COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED
15 MAY -1 AM 10:00

SUBJECT: Stubbs & McQuillan Cattle, LLC

Name of Limited Liability Company

REGISTRATION
BUREAU OF COMMERCIAL
INFORMATION SERVICES

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lawrence V. Stubbs

Name of Person

Stubbs & McQuillan cattle, LLC

Firm/Company

501 West Coker Road

Address

Ft. Pierce FL. 34945

City/State and Zip Code

stuboutelectric@aol.com

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

For further information concerning this matter, please call:

Lawrence Stubbs

772 201-7316
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2015

STUBBS & MCQUILLAN CATTLE, LLC
ATTN: LAWRENCE V. STUBBS
501 WEST COKER ROAD
FT. PIERCE, FL 34945

SUBJECT: STUBBS & MCQUILLAN CATTLE, LLC
Ref. Number: L12000150857

RECEIVED
15 MAY 15 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for STUBBS & MCQUILLAN CATTLE, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6051.

Michelle Milligan
Senior Section Administrator

Letter Number: 715A00009104

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	William H. McQuillan Jr.	3322 SE River Vista Drive	<input type="checkbox"/> Add
		Port Saint Lucie FL. 34952	<input checked="" type="checkbox"/> Remove
MGR	Brett J. Adams	410 North Brocksmith Road	<input checked="" type="checkbox"/> Add
		Fort Pierce FL 34945	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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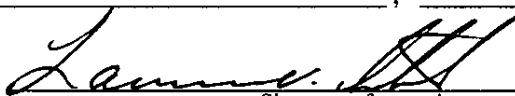
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CLERK OF DISTRICT COURT
U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 24, 2015



Signature of a member or authorized representative of a member

Lawrence V. Stubbs

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
15 MAY 15 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA