

L13000002650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

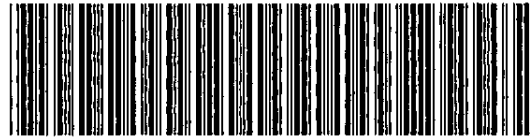
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATION
2013 FEB 25 AM 11:46

C. LEWIS
FEB 26 2013
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: COGNA GLOBAL, 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:

DANIEL M. UKPONG
Name of Person

COGNA GLOBAL, LLC
Firm/Company

1721 SW GLORIA LANE
Address

PORT ST. LUCIE, FL 34953
City/State and Zip Code

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

For further information concerning this matter, please call:

Daniel Ukpong at (772) 626-0232
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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NAKAMYA HEDRICK MS.	1222 RAYMOND AVENUE FORT PIERCE, FL 34950 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MEMBER	NAKAMYA HEDRICK	1721 SW GLORIA LANE PORT ST. LUCIE, FL 34953	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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DIVISION OF CORPORATIONS
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Dated

02/22/2013

Daniel M. Ukpong

Signature of a member or authorized representative of a member

DANIEL M. UKPONG

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00