

L13000047386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

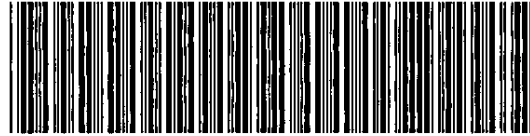
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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JUL 2 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cherokee Pumping of Florida, 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:

Holly Bruno, office Manager  
Name of Person

Cherokee Pumping of Florida, LLC  
Firm/Company

6511 Nova Drive #285  
Address

Davie, Florida 33317  
City/State and Zip Code

cherokeepumpfl@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Holly Bruno at 954 551-1171  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Cherokee Pumping of Florida, LLC

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assigned

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	Todd L Morgan	5559 Headgates	<input type="checkbox"/> Add
		Hamilton, OH 45011	<input checked="" type="checkbox"/> Remove
MGRM	Dan Barber	1200 Holiday Dr., Unit 201	<input type="checkbox"/> Add
		Ft. Lauderdale, FL 33201	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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Remove

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

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Dated June 28, 2013



Signature of a member or authorized representative of a member

Todd L. Morgan

Typed or printed name of signee

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Filing Fee: \$25.00

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