

L13000092596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

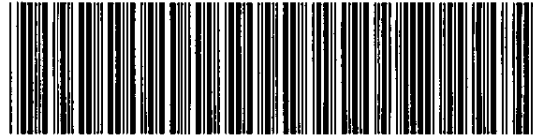
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200264720742

10/02/14--01036--004 **60.00

14 OCT -2 PM 1:07
SECRETARY OF STATE
DIVISION OF CORPORATIONS

OCT 17 2014
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CL TRAINING, 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:

SAMIRA ARABNIA, ESQ. / JED KURZBAN, ESQ.

Name of Person

KURZBAN KURZBAN WEINGER TETZELI & PRATT P.A.

Firm/Company

2650 s.w. 27th Ave, 2nd Floor

Address

MIAMI, FL 33133

City/State and Zip Code

sarabnia@kkwtlaw.com

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

For further information concerning this matter, please call:

SAMIRA ARABNIA, ESQ.

Name of Person

at (305) 444-0060

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2014

SAMIRA ARABNIA, ESQ
KURZBAN KURZBAN WEINGER TETZELI & PRATT
2650 SW 27TH AVE, 2ND FLOOR
MIAMI, FL 33133

SUBJECT: CL TRAINING LLC
Ref. Number: L13000092596

We have received your document for CL TRAINING LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can designate only one person as the registered agent, not two.

The effective date must be specific and cannot be prior to the date of filing.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 314A00022110

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 OCT -2 PM 1:07

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:

N/A

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

16 OCT - 2 PM 1:07

FILED
STATE OF MISSISSIPPI
SYSTEM OF RECORDS
DIVISION

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

N/A

E. Effective date, if other than the date of filing: 10/2/14 (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 SEPTEMBER 13, 2014


Signature of a member or authorized representative of a member

CHRISTOPHER LILLEY

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

1
14 OCT -2 PM 1:07
SECRETARY OF STATE
DIVISION OF CORPORATIONS