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(Address)

(Address)

(City/State/Zip/Phone #)

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

B. BOSTICK

NOV - 5 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Norton Associates 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:

Robert L. Norton

Name of Person

Norton Associates LLC

Firm/Company

136 Estelle Drive

Address

Naple, FL 34112

City/State and Zip Code

norton@designofmachinery.com

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

For further information concerning this matter, please call:

Robert L. Norton

Name of Person

at (774) 244-1248

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 NOV -4 PM 3:43
TALLAHASSEE, FL 32301

Page 1 of 3

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	Nancy Norton	136 Estelle Drive	<input type="checkbox"/> Add
		Naples, FL 34112	<input checked="" type="checkbox"/> Remove
MGRM	Robert L. Norton Jr.	92 Brook St.	<input type="checkbox"/> Add
		Wellesley, MA 02481	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 NOV 14 PM 2:11
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 11-14-13 BY 60322 UCBAW

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

Dated October 31, 2013



Signature of a member or authorized representative of a member

Robert L. Norton

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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FILING OFFICE
TALLAHASSEE, FL