

L13000148768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

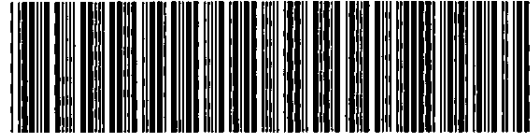
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 16 2013

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P. M. Durkin Gold Sales 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:

Peter Durkin
Name of Person
P.M. Durkin Gold Sales LLC
Firm/Company
777 South Flagler Dr. Suite 800 West Tower
Address
West Palm Beach, FL 33401
City/State and Zip Code
Peterdurkin968@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Durkin at 561, 516-9389
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

P.M. Durkin Gold Sales LLC

(A Florida Limited Liability Company)

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	Xianzhi Zhang	1619 Brockton Ave #1	<input type="checkbox"/> Add
		Los Angeles, CA 90025	<input checked="" 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.)*

Dated _____

Peter M. Dorkin

Signature of a member or authorized representative of a member

Peter M. Dorkin

Typed or printed name of signee

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Filing Fee: \$25.00