

L14000161248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

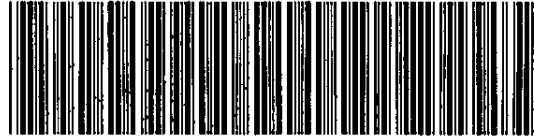
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
JUN 28 P 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JUN 29 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2016

MARLENE SANCHEZ **2ND ATTEMPT**
MMS CORPORATE SERVICES
1451 W. CYPRESS CREEK RD., SUITE 300
FORT LAUDERDALE, FL 33309

SUBJECT: PASE INVESTMENTS LLC
Ref. Number: L14000161248

We have received your document for PASE INVESTMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P01000042243 NATIONAL ENGINEERING CORP..

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 516A00009611



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2016

MARLENE SANCHEZ
1451 W. CYPRESS CREEK RD, SUITE 300
FORT LAUDERDALE, FL 33309

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Ref. Number: L14000161248

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Stacey M Warren
Regulatory Specialist II

Letter Number: 516A00009611

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PASE INVESTMENTS 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:

MMS Corporate Services - Marlene Sanchez

Name of Person

MMS Corporate Services

Firm/Company

1451W CYPRESSCREEK RD SUITE 300

Address

FORT LAUDERDALE, FL 33309

City/State and Zip Code

ogsasuppliers@gmail.com

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

For further information concerning this matter, please call:

Marlene Sanchez

954

6733566

at (_____) _____

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

PASE INVESTMENTS LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ANA VILLEGAS	3301 NE 183rd ST APT 1709	<input type="checkbox"/> Add
		North Miami Beach, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JUAN M SANTOS	3301 NE 183rd ST APT 1709	<input type="checkbox"/> Add
		North Miami Beach, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	BRECKOIL & GAS, LLC	160 Greentree DR. Suite 101	<input checked="" type="checkbox"/> Add
		Dover, Delaware 19904	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JUN 28 2011
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 02, 2016

Signature of a member or authorized representative of a member

Marlene Sanchez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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JUN 28 P 2:11
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA