

L99000000153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

NOV - 8 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABL Technology 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:

Scot Abaray
Name of Person

ABL Technology LLC
Firm/Company

29636 U.S. Highway 27
Address

Dundee, FL 33838
City/State and Zip Code

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

For further information concerning this matter, please call:

Scot Abaray at (863) 439-6066
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

ABL Technology L.C.

The Articles of Organization for this Limited Liability Company were filed on 1/4/1999 and assigned Florida document number L99000000153.

Page 1 of 2

C. 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>
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

MGRM LOUIS LANGERMANN

			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated

10/28/

2009

Signature of a member or authorized representative of a member

Typed or printed name of signee

Scot Abaray
Scot Abaray

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 09 NOV - 2 PM 2:16