H0700000285

(Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
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PICK-UP	WAIT	MAIL
(Bü	siness Entity Na	me)
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Certified Copies	_ Certificate	es of Status
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Special Instructions to Filing Officer:		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

107 OCT 23 PM 3: 3

COVER LETTER

ΓO: Registration Section Division of Corporations	
SUBJECT: Tampa Kennedy, LLC (Name of Foreign Limited Liability Com	pany)
Dear Sir or Madam:	
The enclosed Affidavit by Foreign Limited Liability Company to Managing Member(s) and fee(s) are submitted for filing.	Change Manager(s) or
Please return all correspondence concerning this matter to the fol	llowing:
Raymond P. Sheley, Esq.	
(Name of Person)	
Sheley & Hall, P.C.	
(Firm/Company)	
303 Peachtree St., Suite 4440	
(Address)	
Atlanta, Georgia 30308	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Max Andrews at (404) 880-1358	
at (me Telephone Number)
	·
STREET/COURIER ADDRESS: MAILING	
Registration Section Registration	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 63:	
2661 Executive Center Circle Tallahassee, Tallahassee, Florida 32301	Florida 32314
i analiassee, i lorida - 3230 i	
Enclosed is a check for the following amount:	
\$30 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E123(8/07)

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability com Department of State is: Tampa Kennedy	pany as it appears on the records of the Florida , LLC
2. This entity was formed under the law	s of: <u>Georgia</u>
3. This entity was authorized to transact and its Florida document/registration nu	
and its i forma document/registration nu	mor dodddeedd
4. The name and address of each manag	er or managing member is as follows:
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Fownes, Richard G
	160 Powder Point Avenue
	Duxbury, MA 02332
MGR_	McKenna, Joy
	901 Ponce de Leon Boulevard, Suite 505
	Coral Gables, FL 33134

Required Signature: Ju Mcla	
· · · · · · · · · · · · · · · · · · ·	er, Managing Member or Member)

Filing Fee: \$25

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

 The name of the limited liability compar Department of State is: <u>Tampa Kennedy</u>, <u>L</u> 	ny as it appears on the records of the Florida	· •
2. This entity was formed under the laws o	f: Georgia	·
3. This entity was authorized to transact bu and its Florida document/registration number	siness in Florida on <u>04/19/2007</u> er is <u>M07000002285</u>	 . ,
4. The name and address of each manager of	or managing member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Fownes, Richard G 160 Powder Point Avenue Duxbury, MA 02332	
MGR	McKenna, Joy 901 Ponce de Leon Boulevard, Suite 505 Coral Gables, FL 33134	
		<u></u>
		
	·	
	NECK ASSESSMENT ASSESS	
Required Signature: Signature of Manager, Managing Member or Member)		
Filing	Fee: \$25	ယ္