# 0700003412

(Re	questor's Name)	
(Ad	ldress)	
(	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e) · ,
(Do	cument Number)	
Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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03/28/08--01019--008 \*\*30.00



J. BRYAN

APR 1 0 2008

**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2008

CLARK KNIPPERS C/O FOREMARK, LTD 8235 DOUGLAS AVE, STE 945 DALLAS, TX 75225-6017

SUBJECT: JOLIET FM, LLC Ref. Number: M07000003412

OB NPR -9 PH 2: 09

We have received your document for JOLIET FM, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 208A00018824

# **COVER LETTER**

TO: Registration : Division of Co			
SUBJECT: Joh	LIET FM, LLC		
	,	gn Limited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	CLARK KNIF	(Name of Person)	
	FOREMARK,	(Firm/Company)	Sign Rep
	8235 Douge	AS AUE, STE 945 (Address)	108 APR -9 PH 2:
	DALLAS, TX	<b>75225-6017</b> (City/State and Zip Code)	
For further information	concerning this matter, please of	eall:	
Jim SLuc	ER e of Person)	at ( <b>2/4</b> ) <b>561-65</b> (Area Code & Daytime	/ 7 Telephone Number)
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status  ALREADY PAID	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	LING ADDRESS: tration Section	STREET/COURIER Registration Section	R ADDRESS:

P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

## **SECTION I (1-3 must be completed)**

Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")  6. If the amendment changes the period of duration, indicate new period of duration:  7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:  CHANGE EIN TO 20-4917029  9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdict under the law of which this entity is organized.  Signature of a member or authorized representative of a member CLARKENIPPERS	1.	Name of limited liability company as it appears on the records of the Florida Department State:JOLIET FM, LLC	ent of	·
SECTION II (4-7 complete only the applicable changes)  4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?  5. New name of the limited liability company:  (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")  6. If the amendment changes the period of duration, indicate new period of duration:  7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  CHANGE EIN TO 20-4917029  9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdict under the law of which this entity is organized.  CLARKENIPPERS	2.	Jurisdiction of its organization:		SI NIC
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CLARK KNIPPERS .	9.	amendment(s), duly authenticated by the official having custody of records in the under the law of which this entity is organized.	ioned juri	sdiction
CLARK/KNIPPERS				
Typed or printed name of signee		Typed or printed name of signee	-	

Filing Fee: \$25.00