

M08000002069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

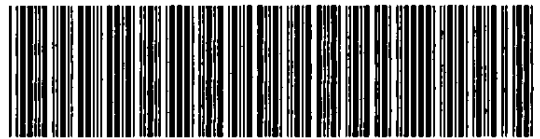
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APR 05 2010

EXAMINER



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SECRETARY OF STATE
DIVISION OF CORPORATION
10 APR -2 PM 2:24

757

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FORREST CAPITAL MANAGEMENT, 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:

BENJAMIN MCCONLEY

Name of Person

FORREST CAPITAL MANAGEMENT

Firm/Company

2258 NW 171 TERRACE

Address

PEMBROKE PINES FL 33028

City/State and Zip Code

BMCCONLEY@AOL.COM

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

For further information concerning this matter, please call:

BEN MCCONLEY

Name of Person

at (318) 264-0230

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

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FORREST CAPITAL MANAGEMENT
2. This entity was formed under the laws of: NEVADA
3. This entity was authorized to transact business in Florida on MARCH 08
and its Florida document/registration number is MO8000002009
4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

AARON MCCONLEY
2258 NW 171 TERRACE
PEMBROKE PINES FL 33028

MGR

ARTHUR BORDERS
2258 NW 171 TERRACE
PEMBROKE PINES FL 33028

MGRM

BENJAMIN MCCONLEY
2258 NW 171 TERRACE
PEMBROKE PINES FL 33028

Required Signature: _____

Signature of Manager, Managing Member or Member

Filing Fee: \$25

10 APR -2 PM 2:24

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS