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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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### **COVER LETTER**

TO: Registration Section Division of Corporations Hallama & Pelliccione, LLC Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph Pelliccione Pelliccione & Associates, LLC Firm/Company 4 Landmark Square, Suite 170 Address Stamford, CT 06901 City/State and Zip Code PellAssoc@att.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph Pelliccione 、327-0408 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☎** \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E055 (12/13)

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)
1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Hallama & Pelliccione, LLC
2. Jurisdiction of its organization: CT
3. Date authorized to do business in Florida: June 18, 2009
SECTION II (4-7 complete only the applicable changes)
4. New name of the limited liability company: Pelliccione & Associates, LLC.
(must contain "Limited Liability Company, ""L.L.C.," or "LLC.")
(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 contain "Limited Liability Company," "L.L.C." or "LLC.")  5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
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6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:
MONE
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.  Signature of the authorized representative
ÿseph Pelliccione
Typed or printed name of signee

Filing Fee: \$25.00

### Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

### PELLICCIONE & ASSOCIATES, LLC

a domestic limited liability company, were filed in this office on April 23, 2007.

Articles of amendment for HALLAMA & PELLICCIONE, LLC, changing its name to PELLICCIONE & ASSOCIATES, LLC, were filed on December 26, 2013.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

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Date Issued: January 14, 2014

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Business ID: 0897085 Standard Certificate Number: 2014010887001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov