M09000003733

(Requestor's Name)	
(Address)	
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(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Business Entity Name)	
(Document Number)	
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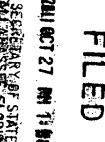
EXAMINER

Office Use Only



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October 20, 2011

MATTHEW WILLIAMS 25314 WINDING WILLOW LN SPRING, TX 77373

SUBJECT: PRO-CENTER, L.L.C. Ref. Number: M09000003733

We have received your document for PRO-CENTER, L.L.C. and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 411A00024071

COVER LETTER

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TO:

Registration Section

Division of Corporations The Product Center, LLC **SUBJECT:** 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: Matthew Williams Name of Person The Product Fulfillment Center, LLC Firm/Company 25314 Winding Willow Ln. Address Spring, TX 77373 City/State and Zip Code spence1351@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Matthew Williams** Area Code & Daytime Telephone Number Name of Person 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

6 5. A

RESOLUTION BY MEMBERS TO RENOUNCE AN ALTERNATE NAME IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or	Managing Members
of THE PRODUCT FULFILLMENT CENTER	, a limited liability
(Name of Limited Liability Company)	
company duly organized and existing under the laws of TEXAS	
(State of Count	ry of Organization)
Because the name of this foreign limited liability company now satisfies	s the requirements of
s. 608.406, Florida Statutes, the limited liability company hereby renoun	nces the following
alternate name in the state of Florida:	24 2
THE PRODUCT CENTER	
(Alternate Name Renounced in State of Florida)	
Date: 10/28/11	7
Signature(s) of Manager(s) and/or Managing Member(s):	FLORE TO
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	:

FILING FEE \$25

Make check payable to Florida Department of State and mail to:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E128 (9/09)