M0900005099

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
(Bootimerk Number)				
Certified Copies Certificates of Status;	<u></u>			
Special Instructions to Filing Officer:				
809A-37068				

Office Use Only



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SECRETAGE F. T. CANGE

S. HAWKES

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EXAMINER

S. HAWKES

S. HAWKES

EXAMINER, 2009

EXAMINER

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2009

RONALD NOLTE 11011 SHERIDAN ST STE 211 COOPER CITY, FL 33026

SUBJECT: POB SERVICES CORP. LLC

Ref. Number: W0900052725

We have received your document for POB SERVICES CORP. LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 309A00038249



December 8, 2009

RONALD NOLTE 11011 SHERIDAN ST STE 211 COOPER CITY, FL 33026

SUBJECT: POB SERVICES CORP. LLC

Ref. Number: W09000052725

We have received your document for POB SERVICES CORP. LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6955.

Letter Number: 809A00037068

Suzanne Hawkes Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 Tallahasson, Florida 32314

COVER LETTER

Registration Section Division of Corporations

SUBJECT:			vices LLC.			
	N	ame of Lin	nited Liability Company			
The enclosed "A Existence, and c	Application by Foreign Limited Li Sheck are submitted to register the	ability Con above refe	npany for Authorization to T renced foreign limited liabili	ransact Business in Florida," Certificate of ity company to transact business in Florida		
Please return all	correspondence concerning this	natter to the	e following:			
	Ronald Nolte					
	Name of Person					
		POB	Services LLC.			
	Firm/Company					
	11011 Sheridan St.					
			Address			
		Cooper	City FL 33026			
		City/St	tate and Zip Code			
			777@aol.com	•		
		·	for future annual report not	ification)		
For further infor	mation concerning this matter, pl	ease call:				
	Ronald Nolte		at (954)	432-9144		
	Name of Person	Area	a Code & Daytime Telephon	e Number		
	ING ADDRESS:		ET ADDRESS:			
	n of Corporations ation Section		n of Corporations ation Section			
P.O. Bo			Building			
	ssee, FL 32314		xecutive Center Circle			
		Tallaha	ssee, FL 32301			
Enclosed is a	check for the following amo	ount:				
\$125	.00 Filing Fee \$130.00 Fili Certificate	_	\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy		

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing					
Members of P.O. P. Sek VICES LLC. (Name of Limited Liability Company)					
(Name of Limited Liability Company)					
a limited liability company duly organized and existing under the laws of					
1/OKIDA					
(State or Country of Organization)					
Because the name of this foreign limited liability company does not satisfy the					
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the					
following name to transact business in the state of Florida:					
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)					
Date: $12 - 22 - 09$					
Signature(s) of Manager(s) and/or Managing Member(s):					
Konorly Molt					
- Roso Nolte					
Rn FO					
· · · · · · · · · · · · · · · · · · ·					