M 1000003921

(Requestor's Name)		
(Addre	ess)	
(Addre	·~~\	
(Addie	:55)	
(City/S	tate/Zip/Phon	e #)
		_
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	me)
•	-	•
<u> </u>	3421	
(Docui	ment Number)	ł
Certified Copies	Certificates	s of Status
Special Instructions to Fili	na Officer	
Special Instructions to Fili	ng Oπicer:	

Office Use Only



100208264741

06/20/11--01045--022 **30.00

06/20/11--01045--023 **25.00

HILEU

11 JUL -1 PH 2: 31

SECRETARY OF STATE
THE AHASSEE, FLORIDA



June 21, 2011

JOHANNES RUMMENY 2183 REGENTS CIRCLE WEST PALM BEACH, FL 33409

SUBJECT: CLINA USA LLC Ref. Number: M10000003921

We have received your document for CLINA USA LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

You may just go the Website SUNBIZ.ORG and send an e-mail to change the principal and mailing address.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 711A00015016

COVER LETTER

TO:	Registration of Division of	on Section f Corporations		
SUB.	JECT:	CLI	NA USA LLC	
		Name of Foreign	Limited Liability Con	npany
Dear	Sir or Madar	n:		
		davit by Foreign Limite or(s) and fee(s) are subm		to Change Manager(s) or
Pleas	e return all co	orrespondence concerni	ng this matter to the f	ollowing:
	ال	OHANNES RUMMEN	IY	
		Name of Person		
		CLINA USA LLC		
		Firm/Company		
	21	83 REGENTS CIRCL	F	
		Address		
	14/50		20.400	
	WES	T PALM BEACH, FL 3 City/State and Zip Cod		
	٠.			
	<u>ا آر</u> F-mail addre	usæð m ss: (to be used for future	e annual report notific	eation)
,	L man adaro.	ss. (to be used for fatal)	annual report nourie	
For fi	urther inform	ation concerning this m	atter, please call:	
,	JOHANNES	RUMMENY at (561)	683 8016
	Name o	of Person	Area Code and Dayt	ime Telephone Number
		COURIER ADDRESS:		ADDRESS:
Registration Section Division of Corporations		_	Registration Section Division of Corporations	
	Clifton Buil		P.O. Box 63	
		tive Center Circle , Florida 32301	Tallahassec	, Florida 32314
	osed is a chec Filing Fee	ck for the following an \$30 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	& \$\int_\$60 Filing Fee, Certificate of Status & Certified Copy

AI

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

FILED 11 JUL-1 PH 2:31

	SECRETARY OF STATE				
The name of the limited liability companion Department of State is:	y as it appears on the records of the Florida CLINA USA LLC				
2. This entity was formed under the laws of	CONNECTICUT				
3. This entity was authorized to transact business in Florida on <u>SEPTEMBER 2.2010</u> and its Florida document/registration number is <u>M10000003921</u> .					
4. The name and address of each manager of	or managing member is as follows:				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
MGR_	JOHANNES RUMMENY 2183 REGENTS CIRCLE WEST PALM BEACH, FL 33409				
MGRM	JOHANNES RUMMENY 2183 REGENTS CIRCLE WEST PALM BEACH, FL 33409				
Required Signature: Signature of Manager,	Managing Member or Member				

Filing Fee: \$25