

111000002398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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ALBANY, NEW YORK

JUN 03 2014  
J. BRUCI



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 12, 2014

YAURENCE LEPPPO  
NICOLAS LEPPPO TAX & ACCOUNTING INC  
3411 TAMiami TRAIL N #201  
NAPLES, FL 34103

SUBJECT: MC SUN, LLC  
Ref. Number: M11000002398

We have received your document for MC SUN, LLC and your check(s) totaling \$25.00. 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.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 114A00010063

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FILED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MC SUN 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:

Laurence Leppo

Name of Person

3411 Tamiami TR. N. #201

Firm/Company

40 Nicolas Leppo Tax + Accounting

Address

Naples - FL - 34103

City/State and Zip Code

laurie@NicolasTax.com

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

For further information concerning this matter, please call:

Laurie Leppo

Name of Person

at ( 239 ) 659-6577

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

### Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

CR2E055 (12/13)

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2014 JUN -2 PM 1:13  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

**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: MC SUN LLC
2. Jurisdiction of its organization: FL
3. Date authorized to do business in Florida: 05/10/2011

**SECTION II (4-7 complete only the applicable changes)**

4. New name of the limited liability company: \_\_\_\_\_  
(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: \_\_\_\_\_
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Removing 3 mgrs - see attached
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

Laurie Leppo  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

*- being held by FL DOR*

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JACKSONVILLE, FLORIDA

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CAROLINE GRILL	34 RUE CARNOT	<input type="checkbox"/> Add
		95150 TAVERNY, FRANCE	<input checked="" type="checkbox"/> Remove
MGR	AMAURY GRILL	34 RUE CARNOT	<input type="checkbox"/> Add
		95150 TAVERNY, FRANCE	<input checked="" type="checkbox"/> Remove
MGR	OPHELIE GRILL	34 RUE CARNOT	<input type="checkbox"/> Add
		95150 TAVERNY, FRANCE	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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