## M13000000833

(Re	questor's Name)					
(Ad	(Address)					
(Address)						
(Cit	y/State/Zip/Phon	e #)				
PICK-UP	MAIT WAIT	MAIL				
(Bu	siness Entity Nar	ne)				
,	•	,				
(Do	cument Number)	<u>,</u>				
<b>(</b>						
Certified Copies	Certificates	e of Status				
Certified Copies	Certificates	s of Status				
Special Instructions to	Filing Officer:					
		j				





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61 /41/18 (0)(198- 0)4 (\*\*28,6)

13 HAR 20 PH 12: 59

B. BOSTICK
MAR 21 2013
EXAMINER

## **COVER LETTER**

	egistration S ivision of Co						
SUBJEC	ст: <u>С</u> С	NOWIST Name of Fore	A I M eign Limited	(PORTS)   Liability Compa	_LC_	_	
Dear Sir	or Madam:						
		it by Foreign Li and fee(s) are s		ity Company to railing.	Change Manag	er(s) or	
Please ret	turn all corre	spondence cond	cerning this r	natter to the follo	owing:		
Th	ema		nc Gr	AW			
<u>co</u>	)WQUI	Name of Perso  STA   1  Firm/Company		5116			
52 Ch	6 Le		alls D	Prive Nov	MR	TALLARASSEE, I LORIBA	13 MAR 20 PH 12: 59
Cons E-m		-		report notification	_ on)	S i LORIDA	PH 12: 59
For further	er informatio	on concerning th	nis matter, pl	ease call:			
Dong	Name of F	Person	at ( <u>850</u> Area C	) 619-915 ode and Daytime	7 Telephone Ni	ımber	_
Re D Cl 26	egistration Se ivision of Co lifton Buildin	porations g Center Circle	SS:	MAILING AE Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations		
Enclosed 2\$25 Filin		for the followin  30 Filing Fee Certificate of Stat	& □ \$5	5.00 Filing Fee & fied Copy	☐ \$60 Filing Fe Certificate of St Certified Copy		

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

1. The name of the limited liability compartment of State is: Cou Quisi	any as it appears on the records of the Florida	
2. This entity was formed under the laws	OF WORTH CAROLINA.	
3. This entity was authorized to transact b and its Florida document/registration num	ousiness in Florida on <u>Feb 7, 2013</u> uber is <u>M 13 0 0 0 0 0 8 3 3</u>	
4. The name and address of each manager	r or managing member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
<u>m Gr</u> m	Thomas A. MEGRAW 1 526 Legacy Falls De North. Chapel Hill, NC 27517	
MERM	MARK A. Crittenden 5160 Yesteroals Dr. Pensacola, FL 32503	
	13 M/R 20	
	0 PH 2: 5	
	2: 59	
Required Signature:  Signature of Manage	er, Managing Member or Member	

Filing Fee: \$25