

102000006515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

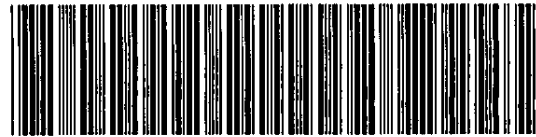
(Business Entity Name)

(Document Number)

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2016 DEC 27 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC 29 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2016

LAW OFFICES OF SCOTT M KETCHUM, PA
SCOTT M KETCHUM, ESQ.
9180 GALLERIA CT, STE. 400
NAPLES, FL 34109

SUBJECT: SHORE TO SHORE REALTY, L.C.
Ref. Number: L02000006515

RECEIVED
2016 DEC 27 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SHORE TO SHORE REALTY, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is P14000079341 "FORT MYERS BEACH INN CORP".

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 716A00026632

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Shore to Shore Realty, L.C., a Florida limited liability company
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott M. Ketchum, Esq.

Name of Person

Law Offices of Scott M. Ketchum, PA

Firm/Company

9180 Galleria Ct., Suite 400

Address

Naples, FL 34109

City/State and Zip Code

sketchum@ketchum-law.com

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

For further information concerning this matter, please call:

Scott M. Ketchum

239 592-5008

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To: Florida Department of State
From: Rosanna Reilly
RE: Release of corporate name

FILED
2016 DEC 27 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom it May Concern:

I was the President and Shareholder of Fort Myers Beach Inn Corp., which has been previously dissolved. Please release the corporate name to Shore to Shore Realty, LLC.


Thank you,

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Shore to Shore Realty, L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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2016 DEC 27 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/20/2002 and assigned
Florida document number L02000006515.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Fort Myers Beach Inn, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
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_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

2018 DEC 21 PM 12:28
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STATE OF NEW YORK
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INLAND COUNTY

2006 DEC 27 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2006 DEC 27 PM 4:28
CLERK OF STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated DECEMBER 12, 2016.

Robana Beile
Signature of a member or authorized

Signature of a member or authorized representative of a member

ROSANNA REILLY

Typed or printed name of signee