

L15000005791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

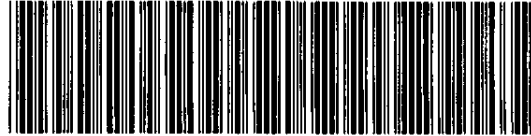
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 11 2015  
T. HAMPTON

CRM  
5-10-15

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 117 THL, LLC  
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:

Gary Hains

Name of Person

Firm/Company

138 15th Avenue South

Address

Naples, FL 34102

City/State and Zip Code

hains.gary@gmail.com

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

For further information concerning this matter, please call:

Adam S. Zipper, Esquire at 954 659-2220  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 6, 2015

GARY HAINS  
138 15TH AVENUE SOUTH  
NAPLES, FL 34102

SUBJECT: 117 THL, LLC  
Ref. Number: L15000005791

RECEIVED  
15 JUN -9 PM 12: 33  
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TALLAHASSEE, FLORIDA

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The effective date must be specific and cannot be prior to the date of filing.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration Section.

Letter Number: 715A00009443



**If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	The Housing League, Inc.	2046 Treasure Coast Plaza	<input type="checkbox"/> Add
		Suite A-370	<input checked="" type="checkbox"/> Remove
		Vero Beach, FL 32960	
MGR	Naples NY, LLC	138 15th Avenue South	<input checked="" type="checkbox"/> Add
		Naples, FL 34102	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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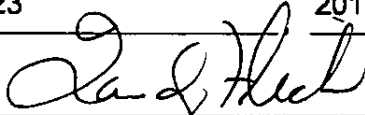
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 23 2015



Signature of a member or authorized representative of a member

SANDRA (SANDY) FLICK

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00