

LO3000034388 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

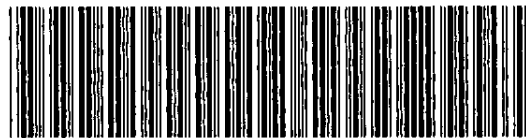
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700244493017

02/28/13--01023--013 **25.00

FILED
TALLAHASSEE, FLORIDA

13 FEB 28 AM 11:32

FILED

B. BOSTICK

MAR - 1 2013

EXAMINED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **FGV Blooming Jasmine, 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:

Tereese C. Filos

Name of Person

Berkowitz Pollack Brant

Firm/Company

200 South Biscayne Blvd, 6th Floor

Address

Miami, FL 33131

City/State and Zip Code

tfilos@bpbcpa.com

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

For further information concerning this matter, please call:

Tereese C. Filos

Name of Person

at (**305**) **960-1269**

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

TALLAHASSEE, FLORIDA

13 FEB 28 AM 11:32

FILED

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

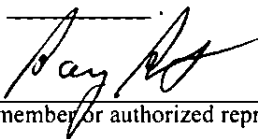
MGRM = Managing Member

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

13 FEB 28
 11:32
 FALL RIVER, FLORIDA

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

Dated _____,



Signature of a member or authorized representative of a member

Barry M. Brant

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 FEB 28 AM 11:32
TALLAHASSEE, FLORIDA