

L15000090007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

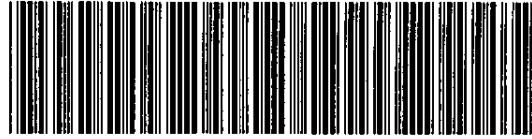
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

1811 Royal Palm, LLC

SUBJECT: _____
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:

J. Stephen Crawford

Name of Person

Crawford & Crawford, Chartered

Firm/Company

3755 Liberty Square

Address

Fort Myers, Florida 33908

City/State and Zip Code

crawlaw@aol.com

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

For further information concerning this matter, please call:

J. Stephen Crawford

239 822-7038

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

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	William S. Katsis	27901 Gasparilla Drive	<input type="checkbox"/> Add
		Bonita Springs, Florida 34135	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr	Billy Katsis	27301 Gasparilla Drive	<input checked="" type="checkbox"/> Add
		Bonita Springs, Florida 34135	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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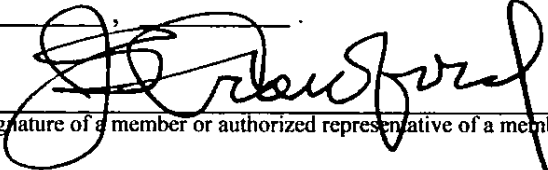
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
(b) The 90th day after the record is filed.

Dated June 10 2015


Signature of a member or authorized representative of a member

J. Stephen Crawford

Typed or printed name of signee

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TALLAHASSEE, FLORIDA