

From:
10/27/2016

10/27/2016 13:58

#499 P.001/005

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L14000009588

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC
Account Number : I20020000144
Phone : (305)520-2344
Fax Number : (305)520-2400

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FECI COMPANY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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Corporate Filing Menu

Help

OCT 28 2016
J. HARRIS

From:

10/27/2016 13:59

#499 P.002/005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FECI COMPANY, 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:

Kolleen O.P. Cobb

Name of Person

Florida East Coast Industries, LLC

Firm/Company

2855 Le Jeune Road., 4th Floor

Address

Coral Gables, FL 33134

City/State and Zip Code

kolleen.cobb@feci.com

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

For further information concerning this matter, please call:

Brenda Johnson

305 5202427
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

From:

10/27/2016 13:59

#499 P.004/005

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>
VP	Marshall Bruce Snyder	2855 Le Jeune Road., 4th Fl, Coral Gables, FL 33134	☒ Add
			☐ Remove
			☐ Change
VP	Michael Bradish	2855 Le Jeune Road., 4th FL, Coral Gables, FL 33134	☒ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Change

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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#498 P.005/005

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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 October 26

2016

Signature of a member or authorized representative of a member

Kolleen O.P. Cobb, Secretary

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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