

A13000000767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

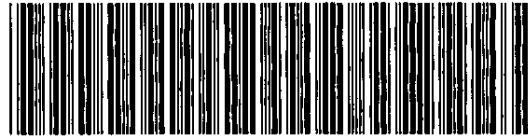
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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06/11/14--01018--018 \*\*52.50

PAID  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JUN 23 PM 3:56

JUN 23 2014  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SAVANNAH ST.PETE LP  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

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

Please return all correspondence concerning this matter to:

Anton Philipp  
Contact Person  
WB Financial LLC  
Firm/Company  
90 Alton Rd, # 1703,  
Address  
Miami Beach, FL 33139  
City, State and Zip Code  
ap@wbfinancialadvisors.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anton Philipp at ( 786 ) 436.6362  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$52.50 Filing Fee     \$61.25 Filing Fee and Certificate of Status     \$105.00 Filing Fee and Certified Copy     \$113.75 Filing Fee, Certified Copy, and Certificate of Status

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 13, 2014

ANTON PHILIPP  
WP FINANCIAL LLC  
90 ALTON RD #1703  
MIAMI BEACH, FL 33139

SUBJECT: SAVANNAH ST.PETE, LP  
Ref. Number: A13000000767

We have received your document for SAVANNAH ST.PETE, LP and your check(s) totaling \$52.50. 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 an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L14000093719 (L14000093719).

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 914A00012905

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P O BOX 6327 -Tallahassee, Florida 32314

FILED  
STATE ARCHIVE  
DIVISION OF CORPORATIONS  
14 JUN 23 PM 3:56

From:

06/20/2014 08:56

#264 P.001/001

ANTON PHILIPP

90 Alton Rd, 1703, Miami Beach, FL 33139

Tel 786.436.6362 email

Registration Section

Division of Corporations

Att.: Jenna

Fax 850.245.6030

RE Name change of Savannah St Pete LP to 14107 AZUL LP

Dear Jenna,

6/19/2014

Please note, the LLC existing under the name of **14107 AZUL LLC**, document number

L14 0000 93719 is owned by me.

I also own the LP under the name of **SAVANNAH ST PETE LP**, document number

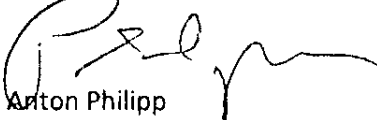
A 13 000 000 767.

Please approve the name change of SAVANNAH ST PETE LP to

14107 AZUL LP

I understand that the names are very similar however I wish such name change to take place.

Thanks for your help

  
Anton Philipp

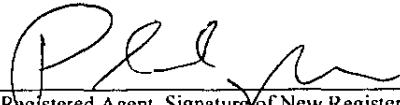
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FLORIDA  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS



**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.*

  
 \_\_\_\_\_  
 If Changing Registered Agent, Signature of New Registered Agent

**D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
G	LI#000029953 14107 LLC	90 Alton Rd., # 1703 Miami Beach FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
G	Savannah 19 LLC	170 Ocean Lane Dr 511 Key Biscayne, FL 33149	<input type="checkbox"/> Add <input checked="" 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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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 STATE OF FLORIDA  
 DIVISION OF CORPORATIONS

**E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:**

- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

**(NOTE: If adding or removing "limited liability limited partnership" status, all general partners must sign this amendment.)**

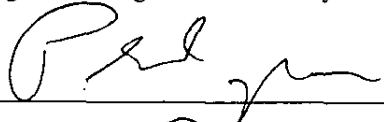
F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

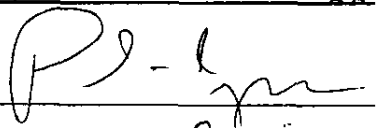
Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

  
\_\_\_\_\_  
Anton Philipp  
for GP 14127 LLC  
\_\_\_\_\_  
\_\_\_\_\_

**Signature(s) of all new or dissociating general partner(s), if any:**

  
\_\_\_\_\_  
Anton Philipp  
for GP Savannah 19 LLC  
\_\_\_\_\_  
\_\_\_\_\_

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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