

03000018036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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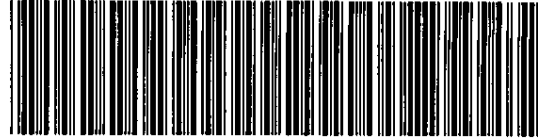
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lake Weir Inn, 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:

Beverly Buczewski
Name of Person
Albright Properties
Firm/Company
PO Box 725
Address
Ocklawaha, FL 32183
City/State and Zip Code

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

For further information concerning this matter, please call:

Beverly Buczewski at (352) 288-3000
Name of Person Area Code Daytime Telephone Number

OR
George J. Albright - cell 352 843 1624

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Lake Weir Inn, LLC

The Articles of Organization for this Limited Liability Company were filed on May 20, 2003 and assigned Florida document number L03000018036

Page 1 of 3

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>
MGR	Agnes E. Albright	PO Box 725	<input checked="" type="checkbox"/> Add
		Ocklawaha, FL 32183	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Agnes E. Albright	PO Box 725	<input checked="" type="checkbox"/> Add
		Ocklawaha, FL 32183	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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