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SEP 02 2014
J. BRUCE

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Siesta Key Properties, L.L.C.
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:

Sean P. OBrien

Name of Person

Siesta Key Properties, L.L.C.

Firm/Company

214 Pleasant Hill Dr

Address

Centerville OH 45459

City/State and Zip Code

SEANPOBRIEN20@hotmail.com

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

For further information concerning this matter, please call:

Sean P. OBrien

Name of Person

at (937)

Area Code

371-7772

Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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

Siesta Key Properties, L.L.C

Siesta Key Properties and Investments, L.L.C.

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

_____	_____	_____	☐ Add
		_____	☐ Remove

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_____	_____	_____	☐ Add
		_____	☐ Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 8/22, 2014

Sean P OBrien

Signature of a member or authorized representative of a member

Sean P. OBrien

Typed or printed name of signee

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Filing Fee: \$25.00

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