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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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N. O'Neil AUG 25 2009

Earnhardt Building  
2250 First Street  
Fort Myers, FL 33901  
Ph: 239-791-7950  
Fax: 239-791-7951



Cape Coral Professional Building  
1716 Cape Coral Parkway East  
Cape Coral, FL 33904  
Ph: 239-542-5253  
Fax: 239-791-7951

All correspondence to Ft. Myers Office

August 21, 2009

**Via regular U.S. Mail**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: L & M Properties/Fred Laier LLC  
Amendment**

Dear Sir/Madam:

Please find enclosed the following documents for filing with the Florida Secretary of State's Office:

1. One original and one copy of the Articles of Amendment for L & M Properties/Fred Laier LLC;
2. The firm's check in the amount of \$25.00, representing the filing fee; and
3. A self-addressed, pre-stamped return envelope.

Please file the enclosed upon receipt of this correspondence. Please also return the filed confirmation in the envelope enclosed herewith for your convenience.

Thanking you in advance for your assistance. If you should have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Bonnie Willin, Paralegal to  
Frank J. Aloia, Jr.

/bw  
enclosures as stated

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: L & M Properties/Fred Laier 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:

**Frank J. Aloia, Jr., Esq.**

Name of Person

**Aloia & Roland, LLP**

Firm/Company

**2250 First Street**

Address

**Fort Myers, FL 33901**

City/State and Zip Code

**mhillstran@aol.com**

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

For further information concerning this matter, please call:

**Frank J. Aloia, Jr., Esq.**

Name of Person

at ( **239** )

**791-7950**

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

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L & M Properties/Fred Laier LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/17/2003 and assigned  
Florida document number L03000044836.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

L & M Propertys, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5303 SW 11th Court

Cape Coral, FL 33914

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5303 SW 11th Court

Cape Coral, FL 33914

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Marilyn Hillstrand

New Registered Office Address:

5303 SW 11th Court

*Enter Florida street address*

Cape Coral

*City*

Florida

33914

*Zip Code*

**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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Marilyn Hillstrand

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Fred Laier	5418 S.W. 2nd Place	<input type="checkbox"/> Add
		Cape Coral, FL 33914	<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

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

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 AUG 24 PM 12:22

FILED

Dated \_\_\_\_\_, \_\_\_\_\_.

*Marilyn Hillstrand*

Signature of a member or authorized representative of a member

Marilyn Hillstrand

Typed or printed name of signee