

L04000070756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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STATE
TALLAHASSEE, FLORIDA

3/10/11

L04000070756

PETER J. BOWERS
ATTORNEY-AT-LAW
PO Box 812515
BOCA RATON, FLORIDA 33481-2515
TELEPHONE: 561.245.1503

ADMITTED IN FLORIDA AND CALIFORNIA

October 25, 2004

Mr. Lee Rivers
Div. of Corps. – Registration
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Re: Doc. No. L04000070756

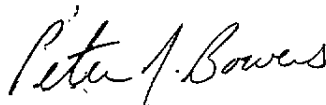
Dear Mr. Rivers:

The enclosed Articles of Correction are hereby delivered for filing in accordance with §608.4115 of the Florida Statutes.

If the requested name change cannot be made on the basis of this submission or for any other reason, kindly return the enclosed filing fee, and as much of the original filing fee for the subject Document Number as is allowed, to my attention at the above address, and nullify the original filing.

Thank you very much for your assistance with these matters.

Very truly yours,



Peter J. Bowers

Enclosures: Articles of Correction; Check No. 3459 for \$25.00 Filing Fee

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04 NOV - 1 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PETER J. BOWERS
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October 25, 2004

Mr. Lee Rivers
Div. of Corps. – Registration
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Re: Doc. No. L04000070756

Dear Mr. Rivers:

Under separate cover, I mailed Articles of Correction to your attention this same date, but inadvertently failed to enclose the check for the filing fee. I have enclosed it herewith. Kindly accept my apologies for the mix-up.

Thank you for your help.

Very truly yours,



Peter J. Bowers

Enclosures: Check No. 3459 for \$25.00 Filing Fee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
Winters Street Realty LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
Article I incorrectly states the Name of the LLC as "Winters Street Realty LLC"
due to clerical error. The correct Name is "Esquire Management Services LLC."
No business has been conducted by or under the name of Winters Street
Realty LLC by, or anyone known to, the undersigned Member-Manager.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: This 25th day of October 2004

Signature of a member or authorized representative of a member

Peter J. Bowers

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA

Duplicate
Original

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Winters Street Realty LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

449 Lake Point South Ln

Deerfield Beach FL 33442

Mailing Address:

PO Box 812515

Boca Raton FL 33481-2515

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Peter J Bowers

Name

449 Lake Point South Ln

Florida street address (P.O. Box **NOT** acceptable)

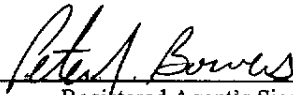
Deerfield Beach

FLORIDA

City, State, and Zip

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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, Florida Statutes..



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Peter J Bowers

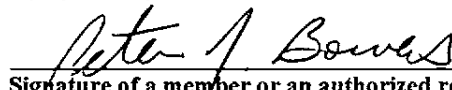
PO Box 812515

Boca Raton FL 33481-2515

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Peter J Bowers

23 September 2004

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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