

LOS 00 0019669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

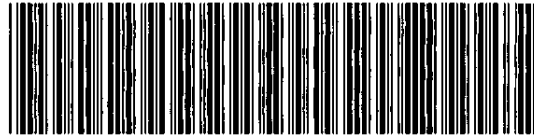
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY - 1 AM 8:55

T. HAMPTON

MAY - 5 2008

EXAMINER

COVER LETTER

**TO: Registration Section •
Division of Corporations**

SUBJECT: BEL MAR INVESTORS 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:

THOMAS A. GIOMBETTI

(Name of Person)

BEL MAR INVESTORS LLC

(Firm/Company)

PO BOX 292906

(Address)

TAMPA, FL 33687-2906

(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS A GIOMBETTI

(Name of Person)

at (920) 915-5440

(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

***BEL MAR
INVESTORS LLC***

**Mail: PO Box 292531
Tampa, FL 33687-2531
E-Mail: rksmith@charter.net
Cell (920) 915-5460 • Fax (813) 988-8155**

April 29, 2008

Ms. Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section
Div. of Corps.
PO Box 6327
Tallahassee, FL 32314

Re Letter No. 208A00019736
Ref No. L05000019669


Dear Tammy:

With regard to our telephone conversation yesterday I am resubmitting an original copy of the Articles of Amendment with the obvious correction to the Registered Agent address and the mailing change of address.

Thank you for handling this amendment and correction for us.

I did take your advice and went on line this morning and filed the Annual Report with the existing name.

Sincerely,


Ruth K. Smith
Administrator

Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 MAY -1 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 3, 2008

THOMAS A GIOMBETTI
P O BOX 292906
TAMPA, FL 33687-2906

SUBJECT: BEL MAR INVESTORS LLC
Ref. Number: L05000019669

We have received your document for BEL MAR INVESTORS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 208A00019736

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY - 1 AM 8:55

BEL MAR INVESTORS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 2/28/05 and assigned
Florida document number 105000019669.

This amendment is submitted to amend the following:

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

BLIND PASS INVESTORS LLC

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

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:

New Registered Office Address:

12909 N 56th Street, Suite 103

(Enter Florida street address)

TEMPLE TERRACE

(City)

, Florida 33617

(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.

(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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

CHANGE OF LLC MAILING ADDRESS TO:

PO BOX 292906

TAMPA, FL 33687-2906

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY - 1 AM 8:55

Dated APRIL 29, 2008

Signature of a member or authorized representative of a member
THOMAS A GIOMBETTI
 Typed or printed name of signee