

# LOB Docu 2394

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

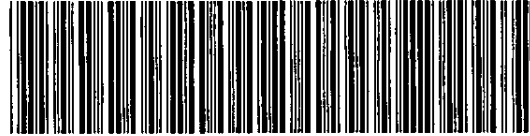
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100276293681

08/24/15--01011--031 \*\*25.00

FILED  
2015 AUG 24 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. CULLEN AUG 25 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Walker's Island LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia M. Silver

Name of Person

Silver Law Group, P.A.

Firm/Company

PO Box 710

Address

Islamorada, FL 33036

City/State and Zip Code

psilver@silverlawgroup.com

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

For further information concerning this matter, please call:

Patricia M. Silver

305

664-3363

Name of Person

at ( )

Area Code

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: Walker's Island LLC

**SECOND:** The Florida Document number of the limited liability company is: L06000002394

**THIRD:** Document to be corrected is:  
2015 annual report

**(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:

The principal address of the corporation should be 62250 Overseas Hwy,

Marathon, FL 33050

John McCarthy was not a managing member in 2015

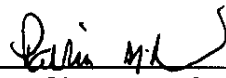
**OR**

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

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

**OR**

- ☐ The electronic transmission of the record was defective.

  
Signature of Authorized Representative

7/13/15  
Date

FILED  
2015 AUG 24 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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