

LOG 000037560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

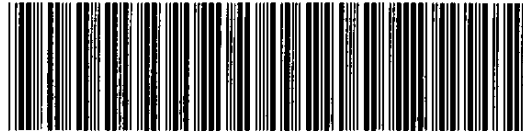
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000112339050

11/16/07--01031--022 \*\*50.00

FILED

2007 NOV 21 PM 2:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11-20



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 19, 2007

CINDY DAVIS  
5051 PELICAN COLONY BLVD.  
#1901  
BONITA SPRINGS, FL 34134

SUBJECT: TLC OF BONITA, LLC  
Ref. Number: L06000037560

We have received your document for TLC OF BONITA, 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):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 107A00066390

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 NOV 21 PM 2:16

FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TLC of Bonita LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cindy Davis  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

5051 Pelican Colony Blvd #1901  
(Address)

Bonita Springs FL 34134  
(City/State and Zip Code)

This is for a  
change of mailing  
address

For further information concerning this matter, please call:

Cindy Davis at (239) 949-5980  
(Name of Person) (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

2007 NOV 21 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:**

TLC of Bonita 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:

Cindy Davis  
(Name of Person)

(Firm/Company)

5051 Pelican Colony Blvd #1901  
(Address)

Bonita Springs FL 34134  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cindy Davis  
(Name of Person)

at ( 239 ) 949-5980  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 NOV 21 PM 2:16

FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

TLC of Bonita LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 4-10-2006 and assigned document number 406000037560

**SECOND:** This amendment is submitted to amend the following:

Change of Address for mailing  
5051 Pelican Colony Blvd. #1901  
Bonita Springs, FL 34134

Dated 11-23-07, \_\_\_\_\_

2007 NOV 21 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

[Signature]  
Signature of a member or authorized representative of a member

Cindy Davis  
Typed or printed name of signer

Filing Fee: \$25.00