T-855 P.002/004 F-724

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000159246 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL P.A. (ST.

Account Number : 076077001601 Phone : (727)502-8200

Fax Number : (727)502-8282

# LLC:AMND/RESTATE/CORRECT OR M/MG RESIGN

RECEIVED
06 JUN 15 PM 2: 32
IVISION OF CORPORATION

## BAHAMA WINDS PARTNERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

3. BRYAN JUN 1 6 2006



May 11, 2006

FLORIDA DEPARTMENT OF STATE

RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL P.A.

SUBJECT: BAHAMA WINDS PARTNERS, LLC

REF: L06000046992

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abendoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist FAX Aud. #: H06000130645 Letter Number: 506A00033338

160 SECONO AVENUE NORTH SUITE 1700 ST. PETERSBURG, FLORIDA 33701

POST OFFICE BOX 14034 ST. PETERSBURG, FLORIDA 33733

TELEPHONE: (727) 502-8258 FAX: (727) 502-8956 BONNIÉ.BARNHILL@RUDEN.COM



## **FACSIMILE COVER SHEET**

DATE:

June 15, 2006

FROM:

Bonnie Barnhill

TITLE:

Paralegal

FILE NO.:

51007-0079

NUMBER OF PAGES:

4

(Including this Cover Page)

If there are any problems or complications, please notify us immediately at (727) 502-8200.

TO:

Joey Bryan, Document Specialist

COMPANY:

Florida Department of State; Division of Corporations

FAX NO.:

850-205-0383

Mr. Bryan, pursuant to our telephone conversation, attached is a revised Cover Sheet for the Articles of Correction on Bahama Winds Partners, LLC. Also attached is a copy of the original Articles of Correction which were electronically filed (H060000130645 3), and a copy of your letter dated May 11, 2006.

If there is a discrepancy in the total amount due for the filing and the Certified Copy between the LLC Amendment and the Corp Amendment, please subtract any additional monies owing from our account.

If you have anyquestions, or if this does not cure the problem, please let me know. My phone number and email address are shown above in the letterhead.

Thank you for your assistance in this matter.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (IF LONG DISTANCE, PLEASE CALL COLLECT) AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

(((H06000130645 3)))

# 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 business days to correct the attached articles of organization or application to transact business in Florida.

n Flor	ida.			• · · · · · · · · · · · · · · · · · · ·	THE TOTAL PROPERTY.		
FIRST BAHAN		The name of the	limited liability comp	any is:	15		
SECO				lication to transact business	<u>چ</u>		
(ÇH	ECK TF	E APPROPRIA	TE BOX AND COMP	LETE THE APPLICABLE S	<u> </u>		
<b></b> ✓	incorrec	ntains an incorrect statement. The incorrect statement, the reason the statement is correct, and the corrected statement are as follows:  RTICLE IV incorrectly states the name of the Registered Agent, which should read:					
	"JOHN W. LODER, SR."						
	ARTICLE V incorrectly states name of the Managing Member, which should read						
	"JOHN W. LODER, JR."						
	<u>OR</u>						
<b>∑</b> ]	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:  The Registered Agent signature should read: "JOHN W. LODER, SR."						
	The Managing Member signature should read: "JOHN W. LODER, JR."						
Dated:	May 10	)		2006			
	JOHN W. LODER, JR.						
	Signature of a member or authorized representative of a member						
		JOHN W. LOI	DER, JR.				
Typed or printed name of signee							
			Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			

# Electronic Articles of Organization For Florida Limited Liability Company

L06000046992 FILED 8:00 AM May 05, 2006 Sec. Of State nculligan

#### Article I

The name of the Limited Liability Company is: BAHAMA WINDS PARTNERS, LLC

## **Article II**

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

475 CENTRAL AVENUE SUITE 205 ST. PETERSBURG, FL. 33701

The mailing address of the Limited Liability Company is:

475 CENTRAL AVENUE SUITE 205 ST. PETERSBURG, FL. 33701

### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

## **Article IV**

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

JOHN LODER 475 CENTRAL AVENUE SUITE 205 ST. PETERSBURG, FL. 33701

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.

Registered Agent Signature: JOHN LODER



# Article V

The name and address of managing members/managers are:

Title: MGRM JOHN LODER 475 CENTRAL AVENUE, SUITE 205 ST. PETERSBURG, FL. 33701

Signature of member or an authorized representative of a member

Signature: JOHN LODER

L06000046992 FILED 8:00 AM May 05, 2006 Sec. Of State nculligan