

L06000056131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

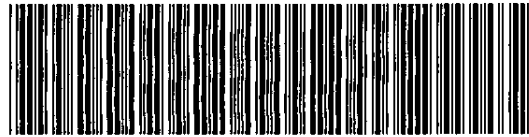
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan JUL 29 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: San Carlos Grove Properties, 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:

David N. Morrison, Esq.

Name of Person

Wilson & Johnson

Firm/Company

2425 Tamiami Trail North, Suite 211

Address

Naples, FL 34103

City/State and Zip Code

dnmorrison@naplesestatelaw.com

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

For further information concerning this matter, please call:

David N. Morrison, Esq.

Name of Person

at (239)

435-1500

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

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TALLAHASSEE, FLORIDA

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

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:

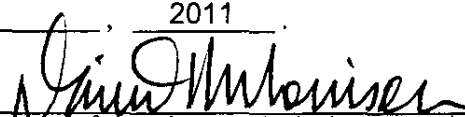
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Norman C. Burke	568 9th Street South, Ste 137 Naples, FL 34102-6620	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Romeo Terezi	2135 Imperial Circle Naples, FL 34110	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 8, 2011


Signature of a member or authorized representative of a member

David N. Morrison

Typed or printed name of signee

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TALLAHASSEE, FLORIDA