

207000117080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

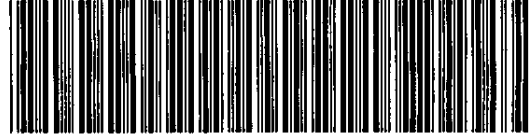
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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NOV 18 2015
J. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

14831 NW 7 AVENUE, LLC

SUBJECT: _____
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:

Robert Kahn

Name of Person

Firm/Company

4522 Sheridan Avenue

Address

Miami Beach, FL 33140

City/State and Zip Code

robert@goodearthproperty.com

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

For further information concerning this matter, please call:

Robert Kahn

at (_____) _____

Name of Person

305
Area Code

672-0469

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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or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	William D. Bailey, Jr.	14831 NW 7 Ave	<input type="checkbox"/> Add
		Miami, FL 33168	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James H. Bailey	14831 NW 7 Ave	<input type="checkbox"/> Add
		Miami, FL 33168	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Donna Day Bailey	10911 N. Bayshore Dr.	<input checked="" type="checkbox"/> Add
		Miami, FL 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brett T. Bailey	10911 N. Bayshore Dr.	<input checked="" type="checkbox"/> Add
		Miami, FL 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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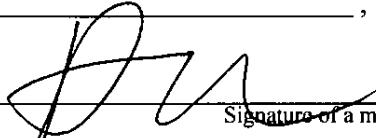
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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated November 19th, 2015



Signature of a member or authorized representative of a member

Robert Kahn - authorized representative

Typed or printed name of signee