

108000030103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

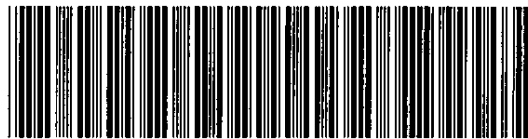
(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

MAY 28 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOLFSTYLE FINE GOLF REAL ESTATE, 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:

Richard D. Saba, Esquire

(Name of Person)

Richard D. Saba, P.A.

(Firm/Company)

2033 Main Street, Suite 303

(Address)

Sarasota, FL 34237-6062

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard D. Saba

(Name of Person)

at (941) 952-0990

(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

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Page 1 of 2

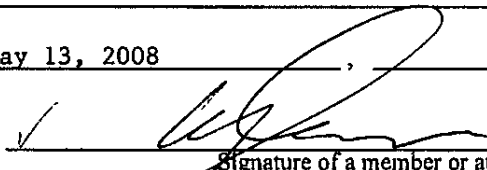
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Stephen LeBlanc	3103 Fruitville Road Sarasota, FL 34237	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Leslie LeBlanc	3103 Fruitville Road Sarasota, FL 34237	<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 May 13, 2008



Signature of a member or authorized representative of a member

William Peoples

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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