

L08000078363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

L08-18363

(Document Number)

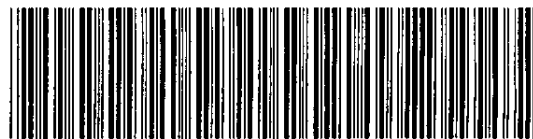
Certified Copies _____

Certificates of Status _____

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*had a check mailed out
DBPR. & a form
form for them*

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

NOV 4 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Prestwick 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:

JOY GLANZER

Name of Person

PRESTWICK PROPERTIES LLC

Firm/Company

25527 W. Newberry Rd. / PO Box 515

Address

Newberry FL 32669

City/State and Zip Code

joyglanzer@cox.net

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

For further information concerning this matter, please call:

Joy Glanzer

Name of Person

at 352 665-3534

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2009

JOY GLANZER 2ND ML
PO BOX 515
NEWBERRY, FL 32669

SUBJECT: PRESTWICK PROPERTIES LLC
Ref. Number: L08000078363

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09 NOV -3 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PRESTWICK PROPERTIES LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$30.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 609A00032575

Prestwick Properties LLC

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

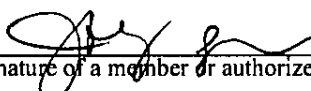
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Janis English	PO Box 1197 Newberry FL 32669	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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TALLAHASSEE, FLORIDA

Dated 10/5, 2009



Signature of a member or authorized representative of a member
JOY GLANZER

Typed or printed name of signee