

**L09000052391**

\_\_\_\_\_  
(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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**09 JUN 15 AM 9:57**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**D. BRUCE**

**JUN 16 2009**

**EXAMINER**

**COVER LETTER-**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 2504 CR, 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:

CRAIG D. BLUME

Name of Person

CRAIG D. BLUME, P.A.

Firm/Company

800 HARBOUR DRIVE

Address

NAPLES, FLORIDA 34103

City/State and Zip Code

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

For further information concerning this matter, please call:

CRAIG D. BLUME

Name of Person

at ( 239 )

417-4848

Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUN 15 AM 9:57

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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

2504 CR, 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

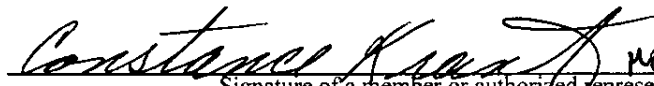
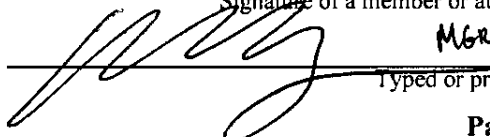
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Asset Acquisition Services	1243 11th Street North Naples, Florida 34102	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Terry Krantz	2504 Longboat Drive Naples, Florida 34104	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Constance Krantz	2504 Longboat Drive Naples, Florida 34104	<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

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

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 09 JUN 15 AM 9:57  
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 TALLAHASSEE, FLORIDA

Dated 6-4-09

  
 Signature of a member or authorized representative of a member  
  
 Typed or printed name of signee