

Aug. 17, 2009 5:39PM  
Division of Corporations

SALVATORI & WOOD

No. 1388 Page 1/3

**LO900071016**

Florida Department of State  
Division of Corporations  
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From: Account Name : SALVATORI & WOOD, BUCKEL & WEIDENMILLER, PL  
Account Number : I20030000112  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

NAPLES CAPITAL GROUP MANAGEMENT, LLC

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August 19, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

NAPLES CAPITAL GROUP MANAGEMENT, LLC  
9132 STRADA PLACE  
FOURTH FLOOR  
NAPLES, FL 34108US

SUBJECT: NAPLES CAPITAL GROUP MANAGEMENT, LLC  
REF: L09000071016

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity must be identical throughout the document.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

FAX Aud. #: H09000183673  
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ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

No. 1404 P. 3  
**FILED**  
09 AUG 19 AM 8:52  
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TALLAHASSEE FLORIDA

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
Naples Capital Group Management, LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Article I - The Name of the Limited Liability Company is:

Naples Capital Commercial, LLC

Article V - The name and address of managing members/managers are:

Naples Capital Group, LLC, 9132 Strada Place, Fourth Floor, Naples, FL 34108

**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: August 17, 2009

Signature of a member or authorized representative of a member

Leo J. Salvatori

Typed or printed name of signee

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

CR2E062 (08/05)

((H09000183673 3)))

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L09000071016  
FILED 8:00 AM  
July 23, 2009  
Sec. Of State  
thampton

**Article I**

The name of the Limited Liability Company is:  
NAPLES CAPITAL GROUP MANAGEMENT, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
9132 STRADA PLACE  
FOURTH FLOOR  
NAPLES, FL. US 34108

The mailing address of the Limited Liability Company is:  
9132 STRADA PLACE  
FOURTH FLOOR  
NAPLES, FL. US 34108

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
SALVATORI, WOOD, BUCKEL & WEIDENMILLER  
9132 STRADA PLACE  
FOURTH FLOOR  
NAPLES, FL. 34108

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: LEO J. SALVATORI

## **Article V**

The name and address of managing members/managers are:

Title: MGR  
VITO CIARAMITARO  
5490 LEE STREET  
LEHIGH ACRES, FL. 33971 US

Title: VMGR  
GARY WALLS  
9132 STRADA PLACE, FOURTH FLOOR  
NAPLES, FL. 34108 US

Signature of member or an authorized representative of a member

Signature: LEO J. SALVATORI

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