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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3280 Rum Row, 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:

Wanda Quillinan

Name of Person

Douglas A. Wood, P.A.

Firm/Company

1100 Fifth Avenue South, Suite 101

Address

Naples, FL 34102

City/State and Zip Code

wandaq@dougwoodlaw.com

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

For further information concerning this matter, please call:

Wanda Quillinan

Name of Person

at (239)

263-7740

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

3280 Rum Row, LLC

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SECRETARY OF STATE
TALLAHASSEE
FLORIDA
Zip Code

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	Strohl Living Trust, Myles L.	328 Bow Line Bend Naples, FL 34102	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Strohl, Karen	328 Bow Line Bend Naples, FL 34102	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Myles L. Strohl	328 Bow Line Bend Naples, FL 34102	<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.)*

Dated June 30, 2011.


Signature of a member or authorized representative of a member

Myles L. Strohl
Typed or printed name of signee