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D. BRUCE
JUN 05 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AQUARIUS LAND HOLDINGS
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:

SCOTT SAIDEL, ESQ.

Name of Person

THE LAW OFFICES OF SCOTT F. SAIDEL

Firm/Company

5301 N. FEDERAL HWY, S. 130

Address

BOCA RATON, FL 33487

City/State and Zip Code

SCOTT-SAIDEL@COMCAST.NET

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

For further information concerning this matter, please call:

SCOTT SAIDEL

Name of Person

at (561) 306-6560

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

AQUARIUS LAND HOLDINGS

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	ISABELLE VITIELLO	2385 NW EXECUTIVE CENTER DR SUITE 100 BOCA RATON, FL 33431	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	CAMILLE VITIELLO	2385 NW EXECUTIVE CENTER DR SUITE 100 BOCA RATON, FL 33431	<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.)

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TALLAHASSEE, FLORIDA

Dated MAY 31, 2012

Signature of a member or authorized representative of a member

ISABELLE VITIELLO

Typed or printed name of signee