# L10000054467

(Requestor's Name)
(Address)
(Address)
(Addicas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

أشاع

Office Use Only



900181014869

05/25/10--01014--011 \*\*25.00



RECEIVED 10 MAY 25 AM IB: 41

B. KOHR MAY 2 5 2010

EXAMINER



## CORPORATE ACCESS, INC.

1.

2.

3.

**5.** 

6.

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

## AWhen you need ACCESS to the world≅

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

	04
WALK IN	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PICK UP: 5/24 Emily	
☐ CERTIFIED COPY	·
рнотосору	
CUS	
# FILING Arts of Correction	
Sea Have Holdings, LLC (CORPORATE NAME AND DOCUMENT #)	
(CORPORATE NAME AND DOCUMENT #)	
(CORPORATE NAME AND DOCUMENT #)	
(CORPORATE NAME AND DOCUMENT #)	

SPECIAL INSTRUCTIONS:	

### ARTICLES OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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: Sea Hare, LLC
<u>SECO</u>	ND: The articles of organization or the application to transact business
(CH	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
<b>√</b>	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  Article I. Name, incorrectly states the name of the Company as Sea Hare, LLC.
	Article I. Name, should correctly state: The name of the limited liability company
	("Company") shall be Sea Hare Holdings, LLC.
	OR  Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
Dated:	
	Signature of a member or authorized representative of a member  Jeff M. Novatt, Esg., Authorized Representative of a Member

Typed or printed name of signee

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)

## ARTICLES OF ORGANIZATION OF SEA HARE, LLC

The undersigned organizer hereby forms a Limited Liability Company under Chapter 608 of the

#### ARTICLE I. NAME

The name of the Limited Liability Company ("Company") shall be Sea Hare, LLC.

#### **ARTICLE II. PRINCIPAL PLACE OF BUSINESS**

The address of the principal place of business of this Company shall be c/o Cheffy Passidomo, P.A., 821 Fifth Avenue South, Suite 201, Naples, Florida 34102, and the mailing address of the Company shall be the same.

#### ARTICLE III. TERM OF EXISTENCE

This Company shall commence its existence on the date these Articles are filed, pursuant to Florida Statutes Section 608.409; and shall exist until dissolved in a manner provided by law or as provided in the operating agreement adopted by the members.

#### ARTICLE IV. NATURE OF BUSINESS

This Company may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

#### ARTICLE V. MANAGEMENT

The Company is to be managed by one or more managers and is, therefore, a manager-managed company pursuant to Florida Statutes Section 608.422.

## ARTICLE VI, INITIAL REGISTERED OFFICE AND REGISTERED AGENT

1. The name of the initial registered agent of the Company is Jeff M. Novatt, Esq.

2. The street address of the initial registered office of the Company shall be Cheffy Passidomo, P.A., 821 Fifth Avenue South, Suite 201, Naples, Florida 34102. The mailing address shall be Cheffy Passidomo, P.A., 821 Fifth Avenue South, Suite 201, Naples, Florida 34102.

## ARTICLE VII, ORGANIZER

The name and street address of the Organizer to these Articles of Organization is:

Jeff M. Novatt, Esq.
Cheffy Passidomo, P.A.
821 Fifth Avenue South, Suite 201
Naples, Florida 34102

IN WITNESS WHEREOF, the undersigned has hereunto set his hands on this 19 day of May, 2010.

Jeff M. Novatt, Esq.
Authorized Representative

#### ACCEPTANCE

I agree, as Registered Agent, to accept service of process; to keep my office open during prescribed hours; to post my name (and any other officers of said limited liability company authorized to accept service of process at the above Florida designated address) in some conspicuous place in my office as required by law. I am familiar with and accept the obligations of my position as registered agent.

WITNESS my hand this 19th day of May, 2010, in the City of Naples, State of Florida.

Jeff M. Novatt, Esq Registered Agent

Doc 3, 10513-0001