

#L11000041628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECOND DEPT OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
APR 25 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2011

KIMBERLY NESTOR
RE/MAX SEAPOINT, LLC
1752 COUNTRY CLUB DRIVE
TITUSVILLE, FL 32780

SUBJECT: RE/MAX SEAPOINT, LLC
Ref. Number: L11000041628

We have received your document for RE/MAX SEAPOINT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L10000098015 "SEA POINT, LLC".

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) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 611A00008979

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Correct name of company

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Nestor

Name of Person

Seapoint, LLC [REDACTED]

Firm/Company

1752 Country Club Drive

Address

Titusville, FL 32780

City/State and Zip Code

kimnestor@yahoo.com

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

For further information concerning this matter, please call:

Kimberly Nestor

Name of Person

at (321) 223-1151

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (08/05)

**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: RE/MAX SEAPPOINT LLC #L11000041628
~~SEAPPOINT CENTRAL, 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:

Incorrect name is: RE/MAX Seapoint, LLC

RE/MAX does not allow another name between their name and LLC.

Correct name should be: ~~SEAPPOINT, LLC~~

SEAPPOINT CENTRAL, LLC

OR



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

Dated: April 7 2011


Signature of a member or authorized representative of a member

Kimberly F. Nestor

Typed or printed name of signee

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)

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CLERK OF STATE
TALLAHASSEE, FLORIDA