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SECONDARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 05 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocean Pearl 3406 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:

Jason S. Weiss
Name of Person

Smith and Verbit
Firm/Company

9900 Stirling Road, Suite 303
Address

Cooper City, Florida 33024
City/State and Zip Code

Jason.Weiss@smithverbit.com
E-mail address: (to be used for future annual report notification)

RECORDS SECTION
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Jason S. Weiss at (954) 965-8350
Name of Person 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

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	Tropical Management Group, LLC	Tropical Management Group, LLC 3220 S. Terra Mar Dr. Lauderdale-By-The-Sea FL 33662	<input type="checkbox"/> Add <input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 30, 2011


Signature of member or authorized representative of a member

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA