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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cuffigan AUG - 7 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SAINT NICOLAS GOLF, 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:

YOLANDA KATON, LEGAL ASST.

Name of Person

ALEX D. SIRULNIK, P.A.

Firm/Company

2199 PONCE DE LEON BLVD. STE 301

Address

CORAL GABLES, FL 33134

City/State and Zip Code

YKATON@SIRULNIKLAW.COM

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

For further information concerning this matter, please call:

YOLANDA KATON

Name of Person

at (**305 443-7211**)

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> |
|--------------|------------------|-----------------------------|--|
| MGR | FERNANDO AZPURUA | 2020 WEST MCNAB RD. STE 112 | <input type="checkbox"/> Add |
| | | FT. LAUDERDALE, FL 33309 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
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| | | | <input type="checkbox"/> Remove |

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

Dated July 3, 2013.



Signature of a member or authorized representative of a member

KARIM FAYAD, MANAGER

Typed or printed name of signee

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Filing Fee: \$25.00

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