

L12000011246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

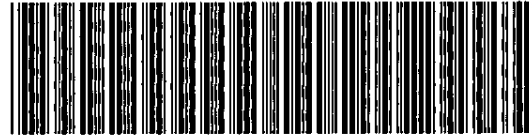
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FEB - 6 2012

EXAMINER



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02/03/12--01022--012 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
12 FEB -3 AM 8:43

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sarasota And Siesta LLC

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:

Patricia Ann Gilliland

Name of Person

Firm/Company

7525 Trillium Boulevard

Address

Sarasota, Florida 34241

City/State and Zip Code

Pattyagilliland@aol.com

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

For further information concerning this matter, please call:

Patty Gilliland

Name of Person

at (941)

706-1408

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)

12 FEB -3 AM 8:13
FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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.

FILED
RECEIVED
12 FEB -3 AM 8:43
DIVISION OF CORPORATIONS

FIRST: The name of the limited liability company is:
Sarasota And Siesta 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: Change the Name as
Department of Business & Professional Regulations
Real Estate License Division (F.S. 475.161)
will incorporate only in licensee's
legal name, "Patricia Gilliland, LLC"
as Realtor # SL 643771. See attached REID
OR

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

Dated: 1/30 2012

x Patricia Gilliland

Signature of a member or authorized representative of a member

Patricia Gilliland

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

Section XI – Instructions and Additional Information

If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

1. Become Active – Sales Associate (SL) or Broker Sales Associate (BL)**a. Information:**

- i. This transaction allows a sales associate or broker sales associate to activate his or her license with a real estate company, whether it is a sole proprietorship or other type of business association.
- ii. The issuance of a license is separate and distinct from the activation of a license.
- iii. After the Department of Business and Professional Regulation (DBPR) issues a license, a sales associate or broker sales associate may not operate as same until the status of the license is updated to active with DBPR.
- iv. Activation is possible only after the applicant (sales associate or broker sales associate) has the proper relationship with a qualified broker.
- v. A sales associate or broker sales associate can activate his or her license after he or she has intentionally deactivated it in the past (See 2, below).

2. Become Inactive – Sales Associate (SL) or Broker Sales Associate (BL)**a. Information:**

- i. This transaction deactivates a sales associate's or broker sales associate's status as operational under the license of a particular qualifying broker or owner/developer.
- ii. A sales associate or broker sales associate who wishes to become inactive, but not seek immediate activation of his or her status with another qualifying broker should seek to complete this transaction.
- iii. A sales associate or broker sales associate seeking to move his or her active status to another qualifying broker for immediate employment should seek to complete the transaction on this form entitled "Change of Broker/Employer for Sales Associate or Broker Sales Associate," (See 3, below).
- iv. A sales associate seeking to become active with an owner/developer immediately should complete the transaction on this form entitled "Become Active with an Owner/Developer - Sales Associate (SL) or Broker Sales Associate (BL)".

3. Change of Broker/Employer for Sales Associate (SL) or Broker Sales Associate (BL)**a. Information:**

- i. This transaction deactivates a sales associate's or broker sales associate's status with one qualifying broker and activates his or her status with another qualifying broker.
- ii. The result of this transaction is that there is no break in active status.
- iii. Sales associates or broker sales associates seeking to transfer employment to another real estate company (qualifying broker) for immediate employment should seek to complete this transaction.
- iv. Successful completion of this transaction will result the same as successful deactivation followed by successful activation under a new qualifying broker.

4. Add/Remove PA, LLC, PL, or PLLC – Sales Associate (SL) or Broker Sales Associate (BL)**a. Information:**

- i. The commission shall license a broker associate or sales associate as an individual or, upon the licensee providing the commission with authorization from the Department of State, as a professional corporation, limited liability company, or professional limited liability company. A license shall be issued in the licensee's legal name only and, when appropriate, shall include the entity designation. [F.S. 475.161]
- ii. Once this transaction is properly completed, DBPR will print a new license and mail it to the applicant.
- iii. For more information see Florida Real Estate Commission FAQs.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sarasota And Siesta LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

7525 Trillium Blvd.

Sarasota, FL 34241

Mailing Address:

7525 Trillium Blvd

Sarasota, FL 34241

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Patricia Ann Gilliland

Name

7525 Trillium Blvd

Florida street address (P.O. Box **NOT** acceptable)

Sarasota

FL 34241

City, State, and Zip

FILED
12 JAN 29 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Patricia Ann Gilliland

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Patricia Ann Gilliland

7525 Trillium Blvd

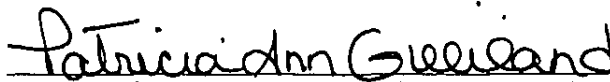
Sarasota, FL 342421

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Patricia Ann Gilliland

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)