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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 29 2013

T. H. HARTMAN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Butler Bay 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:

**Jane Baird**

Name of Person

**Butler Bay LLC**

Firm/Company

**11721 Hampton Greens Drive**

Address

**Fort Myers, FL 33913**

City/State and Zip Code

**eric@capecoralattorney.com**

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

For further information concerning this matter, please call:

**Eric Feichthaler**

Name of Person

at ( **239** ) **542-4733**

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

**Jane Baird**  
11721 Hampton Greens Drive  
Fort Myers, FL 33913

October 23, 2013

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

Dear Sir or Madam:

Enclosed please find an Amendment to the Articles of Organization for Butler Bay LLC.  
A check is included in the amount of \$30.00 to cover the expense of the filing fee and a  
certificate of status. If you need to contact me, please call 239-561-2831.

Thank you.

Sincerely,



Jane Baird

## Butler Bay LLC

Page 1 of 3

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	William E. Baird	11721 Hampton Greens Dr.	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33913	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated October 24, 2013



Signature of a member or authorized representative of a member

Jane Baird

Typed or printed name of signee

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Filing Fee: \$25.00

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