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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SW MANAGEMENT & REALTY, 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:

Matthew Price

Name of Person

SW Management & Realty, LLC

Firm/Company

9260 Estero Park Commons Blvd. Suite 101

Address

Estero, FL 33928

City/State and Zip Code

info@mcgarveydevelopment.com

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

For further information concerning this matter, please call:

Matthew Price

at **239** **738-7800**

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

SW MANAGEMENT & REALTY, LLC

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PMGR	Matthew Price	9260 Estero Park Commons Blvd.	<input checked="" type="checkbox"/> Add
		Suite 101	<input type="checkbox"/> Remove
		Estero, FL 33928	
PMGR	John S. McGarvey	9260 Estero Park Commons Blvd.	<input type="checkbox"/> Add
		Suite 101	<input checked="" type="checkbox"/> Remove
		Estero, FL 33928	
VP	Kevin M. Fitzgerald	300 S. Collier Blvd. #602	<input type="checkbox"/> Add
		Marco Island FL 34145	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

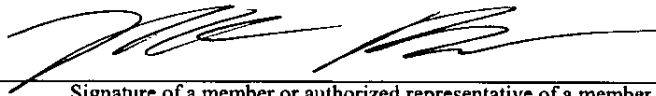
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 19, 2014



Signature of a member or authorized representative of a member

Matthew Price

Typed or printed name of signee

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Filing Fee: \$25.00

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