## Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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(((H12000240005 3)))



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To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name : HEEKIN, MALIN & WENZEL, P.A.

Account Number: 120060000153 Phone

; (904)355-7000

Fax Number

: (904)355-0266

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION 2251 ST, JOHNS BLUF INVESTORS, LLC

Certificate of Status Certified Copy 0 Page Count 01 \$52.50 Estimated Charge

A. LUNT

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**EXAMINER** 

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## **COVER LETTER**

TO: Registration Division o	on Section f Corporations			
SUBJECT;	2251 ST. JO	HNS BLUF IN	VESTORS, LLC	
	Name	of Limited Liability C	ompany	
Dear Sir or Madam	•			
The enclosed Articl	es of Correction and fee(s)	are submitted for IIIIII	g.	
Please return all cor	respondence concerning thi	s maiter to the follow	ing:	
				٠
	T. GEOFFREY HEE	KIN		
C	Name of Person		<del></del>	Denga Denga
				3. E.
HEE	KIN, MALIN & WENZ  Firm/Company	EL, P.A.	_	35
	rimuCompany .			10 m
	P.O. BOX 477			画型
	Address		<del></del>	윤점
J,	ACKSONVILLE, FL 3 City/State and Zip Code	2201	_	
	City/State and Zip Code			
	HMW@JAX-LAW,C	ОМ		
E-mail addres	s: (to be used for future ann	ual report notification	)	
Por further informa	tion concerning this matter,	please call:		
T, GE	OFFREY HEEKIN	at ( 904	355-7000	
N	ame of Person	Area (	Code & Daytime Telephone Number	
STREET/COURING Registration Section		MAILING ADDRESS: Registration Section		
Division of Corpora	itions	Division of Corporations		
Clifton Bullding		P.O. Box 6327		
2661 Executive Cer Tallahassee, Florida		Tallahassee, Plorida 32314		
Enclosed is a check	t for the following amount	:		
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	2 \$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (08/05)				

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## H120002400053

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608,4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

<u>FIRST</u>	<u>[</u> :	The name of the 2251 S	limited liability cor ST. JOHNS BL	npany is: UF INVESTORS, L	LC			
<u>SECO</u>	<u>ND</u> :	The articles of or	ganization or the a	pplication to transact bu	siness			
(CH	ECK 1	HE APPROPRIA	TE BOX AND CON	<u> 1PLETE THE APPLICA</u>	ABLE STATEMENT			
$\checkmark$	Contains an incorrect statement. The incorrect statement, the reason the statement incorrect, and the corrected statement are as follows:  There is a typographical error in the name of the corporation. The word "Bl							
	shoul	d be spelled "BL	UFF"					
					12 E			
	<u>OR</u>				SA N			
		efectively signed. propriate correctio		ich the document was de	efectively signed and			
Dated:		Octobe	or 2	2012				
Dates.	***************************************	4.71	inte ?	2-				
		Signature of a f	nember or authoriz	ed representative of a m	ember			
	S. HUNTER MALIN							
		Typed or printed name of signee						
			Filing Fee:	\$25.00				
			Certified Copy:	\$30.00 (optional)				

CR2E062 (08/05)

# H120002400053

## Electronic Articles of Organization For Florida Limited Liability Company

L12000124249 FILED 8:00 AM September 28, 2012 Sec. Of State nculligan

#### Article I

The name of the Limited Liability Company is: 2251 ST. JOHNS BLUF INVESTORS, LLC

#### Article II

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

1 INDEPENDENT DRIVE SUITE 2200 JACKSONVILLE, FL. US 32202

The mailing address of the Limited Liability Company is:

1 INDEPENDENT DRIVE SUITE 2200 JACKSONVILLE, FL, US 32202

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### Article IV

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

S. HUNTER MALIN 1 INDEPENDENT DRIVE SUITE 2200 JACKSONVILLE, FL. 32202

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.

Registered Agent Signature: S. HUNTER MALIN

#### Article V

The name and address of managing members/managers are:

Title: MRGM S. HUNTER MALIN 1 INDEPENDENT DRIVE, SUITE 2200 JACKSONVILLE, FL. 32202 US L12000124249 FILED 8:00 AM September 28, 2012 Sec. Of State nculligan

#### Article VI

The effective date for this Limited Liability Company shall be: 09/28/2012

Signature of member or an authorized representative of a member Electronic Signature: S. HUNTER MALIN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that falso information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.