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(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
NOV 26 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SANIBEL PROMENADE LAND, 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:

ALAN J. MARCUS

Name of Person

ALAN J. MARCUS, ESQ.

Firm/Company

20803 BISCAYNE BOULEVARD, SUITE 301

Address

AVENTURA, FL 33180

City/State and Zip Code

ALAN@ALANJMARCUS.COM

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

For further information concerning this matter, please call:

ALAN J. MARCUS

Name of Person

at **(305) 937-1800**

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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

SANIBEL PROMENADE LAND, LLC

(A Florida Limited Liability Company)

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>
MGR	GABRIEL NAVARRO	9155 S. DADELAND BOULEVARD	<input checked="" type="checkbox"/> Add
		SUITE 1216	<input type="checkbox"/> Remove
		MIAMI, FL 33156	
MGR	GABE NAVARRO	9155 S. DADELAND BOULEVARD	<input type="checkbox"/> Add
		SUITE 1216	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33156	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 21 11 00 AM '00

FILE

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

Dated

November 19, 2012

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2012 NOV 21 AM 9:40
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TALLAHASSEE, FLORIDA

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