

L13000040987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

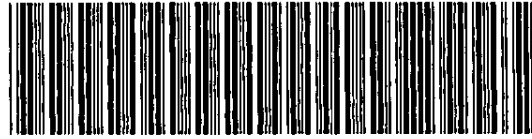
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/29/13--01013--017 **25.00

N. Outigan JUL 30 2013

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Deerfield Beach 786, 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:

Fauzia Jaffer

Name of Person

Firm/Company

3410 Stallion Lane

Address

Weston, FL 33331

City/State and Zip Code

fauziajaffer@aol.com

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

For further information concerning this matter, please call:

Fauzia Jaffer

Name of Person

954 591-7888

at ()

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

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If amehding 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 | Donna M. Caldwell | 6231 SW 188th Ave. | <input type="checkbox"/> Add |
| | | Southwest Ranches, FL 33332 | <input checked="" type="checkbox"/> Remove |
| MGR | Fauzia Jaffer | 3410 Stallion Lane | <input checked="" type="checkbox"/> Add |
| | | Weston, FL 33331 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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| | | | <input type="checkbox"/> Remove |

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

Dated July 26, 2013.

Donna M. Caldwell

Signature of a member or authorized representative of a member

Donna M. Caldwell

Typed or printed name of signee

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Filing Fee: \$25.00