

L13000065968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
18 FEB -8 PM 6:00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1306 Cape Coral Pkwy, 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:

John Paulich IV  
Name of Person

\_\_\_\_\_  
Firm/Company

9115 Galleria Court, Ste 105  
Address

Naples, FL 34109  
City/State and Zip Code

John@jvdevelopment.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Paulich IV at ( 239 ) 776-9400  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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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18 FEB -9 PM 6:08  
and assign

(Name of the Limited Liability Company as it now appears on our records.  
(A Florida Limited Liability Company)

Florida document number L13000065968

**A. If amending name, enter the new name of the limited liability company here:**

9115 Galleria Court, #105  
Naples, FL 34109

9115 Galleria Court, #105  
Naples, FL 34109

Naples, Florida 34103  
City Zip Code

**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGR	John Paulich IV	260 Weber Blvd S	<input checked="" type="checkbox"/> Add
	Jonateco Investments	Naples, FL 34117	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TCG development	9250 Corkscrew Road, #13	<input type="checkbox"/> Add
		Estero, FL 33928	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated February 5, 2018

John Pa

Signature of a member or authorized representative of a member

John Paulich IV

Typed or printed name of signee