

L15000097573

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS

O SIMMONS

AUG 17 2017

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
CLIFTON BLD G

2661 EXECUTIVE CENTER CIRCLE  
TALLAHASSEE FL 32301

ATTN OCTAVIA - EXAMINER

RECEIVED  
2017 AUG 16 AM 11:42  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **BEACH CHIC TREASURES LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Robert W Lee**

Name of Person

**Beach Chic Treasures LLC**

Firm/Company

**25330 BERNWOOD DRIVE, UNIT 3**

Address

**BONITA SPRINGS, FL 34135**

City/State and Zip Code

**boble\_808@yahoo.com**

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

For further information concerning this matter, please call:

**Robert W Lee**

Name of Person

**239**

Area Code

**289-7809**

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☒ \$30 Filing Fee &  
Certificate of Status

*pp. 0 RL*

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: BEACH CHIC TREASURES LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000097573

**THIRD:** Document to be corrected is: 2017 Annual Report - CC8308396537

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Excludes Robert W Lee as AMBR w/o notice. Reason is exclusion is contrary to  
Amendment to Amended Articles of Organization filed 7/11/16.

Correction is include Robert W Lee as AMBR in 2017 Annual Report

**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**



The electronic transmission of the record was defective.

Robert W Lee

Robert W Lee, AMBR

August 14, 2017

Signature of Authorized Representative

Date

DIVISION OF CORPORATIONS  
19 AUG 16 AM 9:08  
FILED

Signature of new registered agent, if applicable : ( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
Registered Agent's Signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**