

L15000153648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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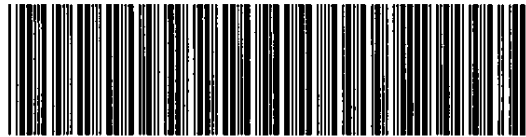
(Business Entity Name)

(Document Number)

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2015 SEP 24 P 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 29 2015  
J. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAKEWOOD LPNER, 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:

CATHY SCOTT

Name of Person

RENDINA

Firm/Company

661 UNIVERSITY BOULEVARD, SUITE 200

Address

JUPITER, FL 33458

City/State and Zip Code

CSCOTT@RENDINA.COM

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

For further information concerning this matter, please call:

CATHY SCOTT

Name of Person

561

Area Code

630-5055

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

☒ \$55 Filing Fee &  
Certified Copy

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

CR2E062 (9/15)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 SEP 24 P 4:00

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**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: LAKEWOOD LPNER, LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000158668

**THIRD:** Document to be corrected is: ARTICLES OF ORGANIZATION

**(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:

ARTICLE IV IS INCORRECT. IT STATED THAT THE MEMBERS ARE REN LPNER III, LLC AND MCR IV INVESTMENTS, LLC. ARTIVLE IV

SHOULD READ AS FOLLOWS: THE NAME AND ADDRESS OF PERSON(S) AUHORIZED TO MANAGE LLC:

TITLE: MBR REN LPNER III, LLC, 661 UNIVERSITY BOULEVARD, SUITE 200, JUPITER, FL 33458

**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.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

9/22/15

2015 SEP 24 P 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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)**

**SIGNATURE/DOCUMENT APPROVAL FORM**

Date: 9/21/2015

Project: Lakewood

The Attorney noted below has reviewed and approved the following document(s) for signature:

Articles of Incorporation Lakewood LPNEN, LLC

Legal department has confirmed whether prior approval of lender(s) or partner(s) is required.

- ☒ Approval of lender(s) not required    ☐ Approval of lender(s) obtained  
☒ Approval of partner(s) not required    ☐ Approval of partner(s) obtained

Comments: RETURN TO CATHY SCOTT

Return by date: TODAY

Reviewed and Approved by:

MJS [Signature]

CSE \_\_\_\_\_

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TALLAHASSEE, FLORIDA