

L15000174061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400278291484

10/23/15--01022 --023 \*\*25.00

FILED  
2015 NOV 10 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NOV 16 2015  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** areandare properties 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:

reid shapiro

Name of Person

areandare properties llc

Firm/Company

1451 west cypress creek road

Address

fort lauderdale florida 33309

City/State and Zip Code

russginiger@gmail.com

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

For further information concerning this matter, please call:

reid shapiro

Name of Person

908

Area Code

917-6000

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 NOV 10 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 26, 2015

REID SHAPIRO  
1451 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309

SUBJECT: AREANDARE PROPERTIES L.L.C.  
Ref. Number: L15000174061

We have received your document for AREANDARE PROPERTIES L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 315A00022620

FILED  
2015 NOV 10 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: areandare properties llc

**SECOND:** The Florida Document number of the limited liability company is: 115000174061

**THIRD:** Document to be corrected is: \_\_\_\_\_

**(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:

in manager section, russell is spelled with 3 "s" where his name only has 2 "s". It should read Russell Giniger.

**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]

1/2/2015  
Date

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.*

[Signature]  
Registered Agent's Signature

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