

L16 0000 09561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

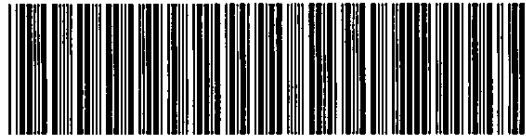
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

sign

Office Use Only



600287983086

07/18/16--01016--018 **30.00

2016-05-3 P 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

SEP 04 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 20, 2016

CHIQUITA CAMACHO
9907 8TH STREET, UNIT 1366
GOTHA, FL 34734

SUBJECT: GCR LEGACY GROUP LLC
Ref. Number: L16000009561

We have received your document for GCR LEGACY GROUP LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 616A00015171

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GCR Legacy Group, 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:

Chiquita Camacho

Name of Person

Firm/Company

9907 8th Street, Unit 1366

Address

Gotha, Florida 34734

City/State and Zip Code

legacyconsultingfl@gmail.com

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

For further information concerning this matter, please call:

Chiquita Camacho at (321) 689-4884
Name of Person Area Code 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

**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: GCR Legacy Group, LLC

SECOND: The Florida Document number of the limited liability company is: L16000009561

THIRD: Document to be corrected is: Articles of Organization for Florida Limited Liability Company

(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:

① The word "Property" was inadvertently left out of the company name at the time of the initial filing.

② Corrected Name is : GCR Legacy Property Group, LLC

③ Corrected: Registered Agent: Chiquita Camacho, 9907 8th Street, Gotha, Florida 34734, Unit 1366

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.

FILED
2020-06-23 P 3:03
CLERK OF STATE
TALLAHASSEE, FLORIDA

Chiquita Camacho 7/29/2016
Signature of Authorized Representative 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.

Chiquita Camacho
Registered Agent's Signature

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