

Florida Department of State
Division of Corporations
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From: Account Name : LEOPOLD KORN & LEOPOLD, P.A.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RAVINIA PORT ST. LUCIE, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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BB 7/22/21

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>
AMBR	GVP Ravinia Centerline, LLC	15481 NW 12th Street, Suite 309	<input checked="" type="checkbox"/> Add
		Sunrise, FL 33326	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Centerline Capital Advisors, LLC	15499 SW 12th St, Suite 507	<input type="checkbox"/> Add
		Sunrise, FL 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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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 July 16, 2021



Signature of a member or authorized representative of a member

Craig S. Perry

Typed or printed name of signee

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