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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2016

RITA JACKMAN
4575 VIA ROYALE
FORT LAUDERDALE, FL 33991

SUBJECT: SBL REALTY GROUP, LLC
Ref. Number: L16000115587

RECEIVED
2016 JUL 12 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SBL REALTY GROUP, LLC 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), 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.

Dionne M.Scott
Regulatory Specialist II

Letter Number: 716A00013893

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19 JUL 12 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SBL REALTY 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:

RITA JACKMAN

Name of Person

JACKMAN, STEVENS & RICCIARDI, PA

Firm/Company

4575 VIA ROYALE

Address

FORT MYERS, FL 33991

City/State and Zip Code

rjackman@your-advocates.org

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

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16 JUL 12 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

RITA JACKMAN

Name of Person

at **(239)**

Area Code

841-0393

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: SBL REALTY GROUP, LLC

SECOND: The Florida Document number of the limited liability company is: L1600115587

THIRD: Document to be corrected is: ARTICAL 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:

**REMOVAL OF AUTHORIZED PERSON (S) DETAIL - in Title AMBR
(2) PAILES, ROBERT & HARTLEY, CHARLES**

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.

RITA JACKMAN 

Signature of Authorized Representative

JUNE 24, 2016

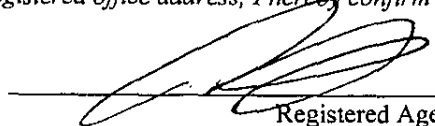
Date

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TALLAHASSEE, FLORIDA

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)**