

L16000189452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

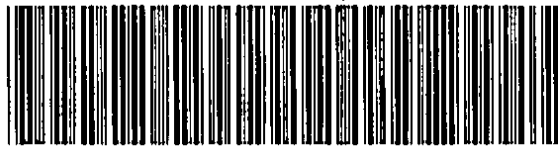
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S. WARREN

AUG 08 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2017

WYNIE KING ANDERSON
1230 VINETREE DRIVE
BRANDON, FL 33510

SUBJECT: BLUE PACIFIC REALTY, LLC
Ref. Number: L16000189452

We have received your document for BLUE PACIFIC REALTY, LLC and your check(s) totaling \$35.00. 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: 617A00015333

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Blue Pacific Realty, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

~~Name of Person~~

~~Firm/Company~~

~~Address~~

~~City/State and Zip Code~~

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

For further information concerning this matter, please call:

Wynne K. Anderson at (813) 503-2832
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
- ☒ \$35.00 per conversation with Representative

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 August 4, 2017

Wynne Anderson
Signature of a member or authorized representative of a member

Wynne Anderson
Typed or printed name of signer

FILED
17 AUG - 7 PM 3:19
DEPARTMENT OF STATE
HALLWAY - FLORIDA