

L17 800082360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

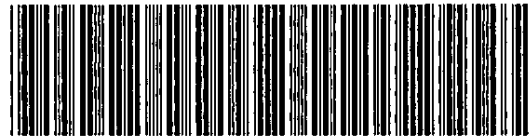
(Business Entity Name)

(Document Number)

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

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FILED RECEIVED  
17 JUN 13 AM 7:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Carrabelle Lodge, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JULIE SCHULZ

Name of Person

SUMMIT GROUP MANAGEMENT, LLC

Firm/Company

3427 BANNERMAN ROAD, SUITE D208

Address

TALLAHASSEE FL 32312

City/State and Zip Code

julie.schulz@summitgroup.biz

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

For further information concerning this matter, please call:

JULIE SCHULZ

Name of Person

at ( 950 ) 219-8207

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

☐ \$55 Filing Fee & Certified Copy

Cornabelle Lodge, LLC

Page 1 of 3

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>
MGR	Tierra Vista	2073 Summit Lake Dr.	<input type="checkbox"/> Add
	Group, LLC	#155	
		Tallahassee FL 32317	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CESC, Inc	3427 Bannerman Rd.	<input checked="" type="checkbox"/> Add
		Suite D-208	<input type="checkbox"/> Remove
		Tallahassee FL 32312	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 JUN 13 AM 7:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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)

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**

6/2, 2017

\_\_\_\_\_, 2011.

*Charles*

Signature of a member or authorized representative of a member

Claude R. Walker

Typed or printed name of signee