

5/19/2018

2019-02-06 08:43:41 PST

LegalZoom.com, Inc. From: Sarah Acevedo

Division of Corporations

L17000255357

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H18000154656 3)))



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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CAPE CORAL VACATION GETAWAYS & PROPERTY
MANAGEMENT,**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$55.00 |

FEB 07 2019

A. LUNT

2019 FEB -6 AM 10:43

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TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

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5/21/2018 1:35:44 PM PAGE 1/001 Fax Server



May 21, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CAPE CORAL VACATION GETAWAYS & PROPERTY MANAGEMENT, LLC
2132 SW 40TH TER
CAPE CORAL, FL 33914US

SUBJECT: CAPE CORAL VACATION GETAWAYS & PROPERTY MANAGEMENT, LLC
REF: L17000255357

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

We are enclosing the proper form(s) with instructions for your convenience.

The correct form to be submitted is the Statement of Correction.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H18000154656
Letter Number: 718A00010546

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPE CORAL VACATION GETAWAYS & PROPERTY MANAGEMENT, 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

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/State and Zip Code

Majikman42@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

323

962-8600

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

CR2E062 (12/13)

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19 FEB -6 AM 9:55
TALLAHASSEE, FLORIDA

**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:
CAPE CORAL VACATION GETAWAYS & PROPERTY MANAGEMENT, LLC

SECOND: Document to be corrected is:
Articles 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:

The effective date of the Limited Liability Company was erroneously stated as
12/14/2017

The effective date of the Limited Liability Company is corrected to
1/1/2018

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JACKSONVILLE, FLORIDA

OR

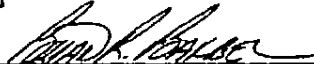


Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR



The electronic transmission of the record was defective.



Brian R Barber

1-24-2019

Signature of Authorized Representative

Date

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