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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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LAW OFFICE OF CONRAD WILLKOMM, P.A.

3201 TAMIAMI TRAIL N. 2ND FLOOR NAPLES, FL 34103

Tel: 239.262.5303 · Fax: 239.262.6030

4415 METRO PKWY UNIT 218 Ft. Myers, FL 33916

March 22, 2023

SENT VIA UPS

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe St., Suite 810 Tallahassee, FL 32303

RE: Matter: - Statement of Correction - Little River 87, LLC

File No. 23B.0470.CW

To Whom It May Concern:

For the above referenced matter enclosed please find:

- > Check No. 2058 in the amount of \$60.00, representing payment for the Filing Fee, Certificate of Status, and Certified Copy for Little River 87, LLC:
- > Cover Letter for LLC; and
- > Statement of Correction for Florida or Foreign Limited Liability Company.

If you have any questions, please do not hesitate to contact our office. Thank you for allowing us to be of service to you.

Respectfully.

LAW OFFICE OF CONRAD WILLKOMM, P.A.

Desiree' A. Boissiere

Paralegal

Enclosures

COVER LETTER

TO: Registration Division of C			
Little R SUBJECT:	iver 87, LLC		
SOBJECT:	;	Name of Limited Liab	pifity Company
Dear Sir or Madam:			
The enclosed Stateme	nt of Correction and fee(s):	are submitted for filin	g.
Please return all corre	spondence concerning this i	natter to the followin	g:
Conrad Willkomm, E	sq.		
	Name of Person		_
Law Office of Contac	I Willkomm, P.A.		
-	Firm/Company	· · · · · · ·	
3201 Tamiami Trail (N. 2nd Floor		
	Address		-
Naples, FL 34103			
	City/State and Zip Code		=
conrad@swfloridalav	.com		
E-mail address:	(to be used for future annua	report notification)	
For further informatio	n concerning this matter, pl	ease call;	
Conrad Willkomm		239 at (262-5303
Nan	ne of Person	Area Code	Daytime Telephone Number
P.O. Box 6	n Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check f	or 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

		ction 605,0209, F.S., this document is being submitte	· · · · · · · · · · · · · · · · · · ·	
FIRST	[: The n	ame of the limited liability company is: Little River 8		
SECO THIR		The Florida Document number of the limited liab Document to be corrected is: Articles of Organizat		
	9	CHECK THE APPROPRIATE BOX AND COM	PLETE THE APPLICABLE STATEMENT	
Ø		ins an incorrect statement. The incorrect statement, nent are as follows:	the reason the statement is incorrect, and the corrected	
	The n	nanager of the company was filed incorrectly as LR Na	oles Trust, effective as of March 14, 2023	
	The i	nanager should be listed as "LR Naples Trust, effective	as of March 21, 2023"	
	Addit	ionally, the filing effective date March 20, 2023 is inco	rrect and should be corrected to March 21, 2023	
	OR Was c as foll OR		nt was defectively signed and the appropriate correction	are
	The ei	lectronic transmission of the record was defective.		
		Signature of Authorized Representative	Date	
		ew registered agent, if applicable :(NOTE: if correct designation).	ing the registered agent, the new registered agent must si	gn
I hereh provisi obligat reflect	y accep ons of a ions of	all statutes relative to the proper and complete performy position as registered agent as provided for in Case in the registered office address thereby confirm t	ct in this capacity. I further agree to comply with the mance of my duties, and I am familiar with and accept that the paper 605, F.S. Or, if this document is being filed to men that the limited liability company has been notified in wri	c/c
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	