## M10000002035

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(	Requestor's Name)	
. (	Address)	
	Address)	
(	City/State/Zip/Phone #)	
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ANALYSEF FLORIDA

## **COVER LETTER**

TO:

CR2E123(8/07)

Registration Section

**Division of Corporations** NATIONAL CONDOMINIUM MANAGEMENT LLC Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL A. HSH Name of Person NATIONAL CONDOMINIUM MANAGEMENT, LLC
Firm/Company

3160 N. LAKE SHORE DRIVE, SUITE 200

Address CHICAGO IL 60 613
City/State and Zip Code MESH C CFC PARTNERS Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 312 ) 733-1600 Area Code and Daytime Telephone Number Michael A. FISH
Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$60 Filing Fee, 🚨 \$30 Filing Fee & □ \$55.00 Filing Fee & □\$25 Filing Fee ·Certificate of Status Certified Copy Certificate of Status & Certified Copy

## FILED

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## AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. The name of the limited liability company Department of State is: NATIONAL CE	whom we man man and the Florida
2. This entity was formed under the laws of	TLUNOIS
3. This entity was authorized to transact bus and its Florida document/registration numbe	iness in Florida on <u>05/03/2010</u> r is <u><b>M10000002035</b>.</u>
4. The name and address of each manager of	r managing member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MICHARL FISH  3660 N. LAKE SHOLE DR. SUME 200 CHICAGO D. 60613
MGRM	JOHN CADDEN 3460 N. LAKE SHOKE Dr. SUME 200 CHICAGO DE 60613
MGRM	LINDA LEVINE  3660 N. LAKE SHORE DE SUTE 200  CHICAGO B. 60613
····	
Required Signature:	
Signature of Manager,	Managing Member or Member

Filing Fee: \$25