Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

: (850) 878-5368 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **:-

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROMPANO BEACH LEASED HOUSING ASSOCIATES SLP I, LLC

<u>α</u>

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

8/8/2013

COVER LETTER

TO: Registration Section

Division of Corporations

Pompano Beach Leased Housing Associates SLP I, 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:

John Nolde, Esq.

Name of Person

Winthrop & Weinstine

Firm/Company

225 South Sixth Street, Suite 3500

Address

Minneapolis, MN 55402

City/State and Zip Code

tsteffen@Dominiuminc.com

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

For further information concerning this matter, please call:

John Nolde, Esq.

at 612 604-6400

Area Code and Daytime Telephone Number

Name of Person

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:

Filing Fee

5 \$30 Filing Fee & Certificate of Status

\$55.00 Filing Fee & Certified Copy

☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E123(8/07)

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

Department of State is: Pompano Beach Leased Ho	using Associates SLP I, ELC
2. This entity was formed under the laws of	Minnesota
3. This entity was authorized to transact bus and its Florida document/registration numbe	
4. The name and address of each manager o	r managing member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Armand E. Brachman
_	2905 Northwest Boulevard, Suite 150
	Plymouth, MN 55441
MGR	Paul R. Swean
	2905 Northwest Boulevard, Suite 150
	Plymouth, MN 55441
MGR_	Mark S. Moorhouse
	2905 Northwest Boulevard, Suite 150
	Plymouth, MN 55441
	
	
Required Signature:	
	Managing Member or Member

Filing Fee: \$25