M136000002136

(Re	equestor's Name)	
(Ad	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Nar	me)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		•

Office Use Only



600249285116

06/27/13--01007--009 **25.00

2819 JUL -5 AM 58 38

JUL - 8 2013



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 28, 2013

WILLIAM BLANCHARD **PO BOX 811** GENEVA, IL 60134

SUBJECT: GAFFNEY BLANCHARD REAL ESTATE, LLC

Ref. Number: M13000002736

We have received your document for GAFFNEY BLANCHARD REAL ESTATE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammi Cline Regulatory Specialist II

Letter Number: 313A00016189

COVER LETTER

TO:	Registration S Division of C					
SUBJ	ECT:G	AFFNEY BLANCHARD	REAL ESTATE, LLC			
Name of Foreign Limited Liability Company						
Dear :	Sir or Madam:		,			
Mana	ging Member(s) and fee(s) are submit	ted for filing.	Change Manager(s) or		
Please	e return all con	espondence concerning	g this matter to the foll	owing:		
١	WILLIAM B BLA	NCHARD	•			
		Name of Person				
	GAFFNEY BLA	NCHARD REAL ESTA	TE, LLC			
		Firm/Company		12 can		
	PO BOX 811			100 to 10		
		Address		1 (7)		
	GENEVA, IL	60134				
		City/State and Zip Code	2) ;		
		@GBRE8.COM				
	E-mail address	(to be used for future	annual report notificat	ion)		
For fi	urther informat	ion concerning this ma	tter, please call:			
ВІІ	L BLANCHAR	D at (6	30) 253-9742			
	Name of		Area Code and Daytim	e Telephone Number		
	Registration S Division of C Clifton Build 2661 Executive	orporations	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7		
□\$25	osed is a check Filing Fee	for the following am □ \$30 Filing Fee & Certificate of Status	ount: \$55.00 Filing Fee & Certified Copy	Certificate of Status & Certified Copy		

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

The name of the limited liability compartment of State is: GAFFNEY BLAN	ny as it appears on the records of the Florida ICHARD REAL ESTATE, LLC	_•
2. This entity was formed under the laws o	f:ILLINOIS	
3. This entity was authorized to transact bu and its Florida document/registration numb		_
4. The name and address of each manager		_
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	JAMES M BLANCHARD 6463 LAGORCE CT LAKE WORTH, FL 33463	NEW
_MGRM	WILLIAM B BLANCHARD ONE TRANSAM PLAZA, SUITE 310	
	OAKBROOK TERRACE, IL 60181	
		AS B
<u>-</u>		-5 A
		- (1) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Required Signature: Signature of Manager	Blancher or Member	

Filing Fee: \$25