

M98000000649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

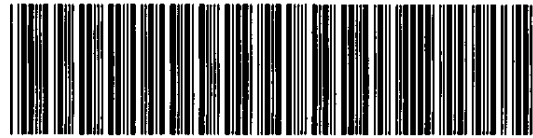
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900265416409

10/14/14--01030--006 **30.00

FILED
2014 NOV -4 PM 9:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOV - 5 2014

T CLINE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2014

CHRISTOPHER GARRIS
850 SW MARTIN DOWNS BLVD.
PALM CITY, FL 34990

SUBJECT: LAUDERDALE-STAPLES, L.L.C.
Ref. Number: M98000000649

We have received your document for LAUDERDALE-STAPLES, L.L.C. and your check(s) totaling \$30.00. 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: 014A00022287

2014 NOV -4 PM 9:56
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lauderdale-Staples, L.L.C.
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Garris
Name of Person

Lauderdale-Staples, L.L.C.
Firm/Company

850 SW. Martin Downs Blvd.
Address

Palm City, FL 34990
City/State and Zip Code

CGARRIS@CGINVESTMENT.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Garris at (772) 287-1844
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

2014 NOV -4 PM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: LAuderdale - Staples, L.L.C.
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 6/22/1998

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: (Remove) Stanley R. GARRIS

(Add) Christopher GARRIS

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

CKG

Signature of the authorized representative

Christopher GARRIS

Typed or printed name of signee

Filing Fee: \$25.00

2014 NOV -4 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA