

LO9UUU61481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

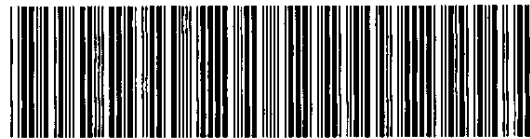
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/25/09--01023--003 **25.00

RECEIVED
09 JUN 25 AM 11:10
DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

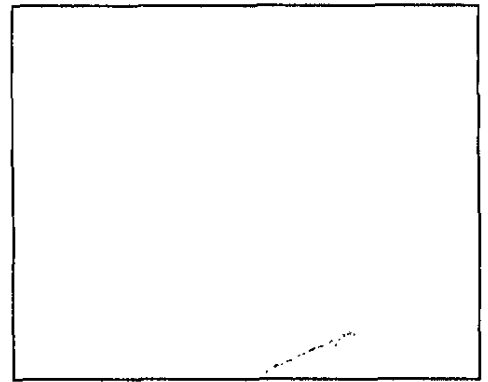
FILED
09 JUN 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUN 26 2009

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.
1211 CIRCLE DRIVE
TALLAHASSEE, FL 32301
PHONE (850)656-6446



WALK-IN

ENTITY NAME:

LIGHT BULB DEPOT OF TAMPA, LLC

CK# 3981

AMOUNT \$25.00

PLEASE FILE THE ATTACHED CORRECTION & RETURN THE FOLLOWING:

- CERTIFIED COPY
- STAMPED COPY
- CERTIFICATE OF STATUS

OFFICE USE ONLY

FILED
09 JUN 25 PM 4:15
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

Examiner's Initials

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIGHT BULB OF TAMPA
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FILED
09 JUN 25 PM 4:45
TALLAHASSEE, FLORIDA

TLS
Name of Person

GEC WESTON
Firm/Company

2731 EXECUTIVE PARK DRIVE, SUITE 4
Address

WESTON, FL
City/State and Zip Code

33331
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TLS at (954) 318-2787
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

CR2E062 (08/05)

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
LIGHT BULB OF TAMPA LLC

SECOND: The articles of organization or the application to transact business

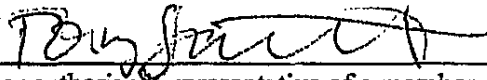
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
LIGHT BULB DEPOT OF TAMPA LLC

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: JUNE 25, 2009



Signature of a member or authorized representative of a member

TONY SMITH, AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

**Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)**

FILED
JUN 25 2009
TALLAHASSEE
STATE OF FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L09000061481
FILED 8:00 AM
June 24, 2009
Sec. Of State
gharvey

Article I

The name of the Limited Liability Company is:

LIGHT BULB OF TAMPA LLC

Article II

The street address of the principal office of the Limited Liability Company is:

2121 CORNELL STREET
SARASOTA, FL. 34237

The mailing address of the Limited Liability Company is:

PO BOX 2363
SARASOTA, FL. 34230

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
4
WESTON, FL. 33331

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: PETER SOUZA, ASST SEC.

Article V

The name and address of managing members/managers are:

Title: MGRM
CALEB HOLDINGS, INC.
2620 MARYLAND PARKWAY, SUITE 854
LAS VEGAS, NV. 89109

Title: MGR
MATTHEW LUDWIG
2121 CORNELL STREET
SARASOTA, FL. 34237

Title: MGR
PATRICIA ANDERSON
2121 CORNELL STREET
SARASOTA, FL. 34237

L09000061481
FILED 8:00 AM
June 24, 2009
Sec. Of State
gharvey

Article VI

The effective date for this Limited Liability Company shall be:

06/24/2009

Signature of member or an authorized representative of a member

Signature: STEVEN L. TINDAL