

LO9UUU61481

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

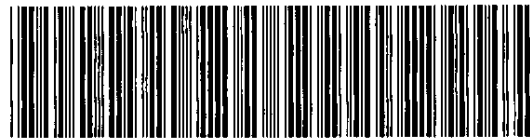
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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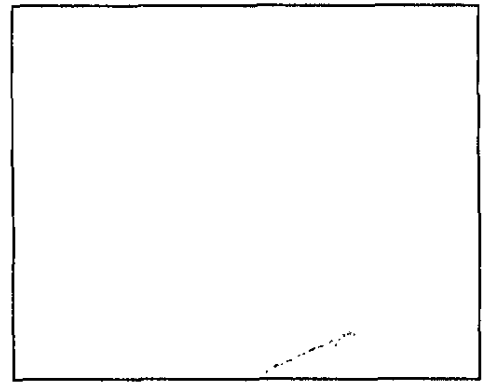
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09 JUN 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

**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:

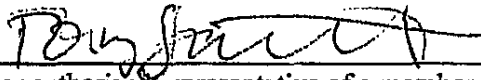
LIGHT BULB DEPOT OF TAMPA LLC

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