

L14000055784

(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:

Stat of Car

Office Use Only



200260095952

05/19/14--01011--018 **55.00

FILED
14 MAY 19 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G&G PROPERTY SOLUTIONS, LLC
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

WENDY BYFORD
Name of Person

YOUR ENTITY SOLUTION, LLC
Firm/Company

6440 SKY POINTE DR. STE. 140-106
Address

LAS VEGAS, NV 89131
City/State and Zip Code

LEEDASAN@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WENDY BYFORD at (702) 506-0192
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

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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: G&G PROPERTY SOLUTIONS, LLC

SECOND: The Florida Document number of the limited liability company is: L14000055784

THIRD: Document to be corrected is:
ARTICLES OF ORGANIZATION

(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:

Incorrect: The principal office CITY is listed as CRESTVILLE.

Reason: Typographical error.

Correction: The principal office street address CITY is CRESTVIEW.

The mailing address CITY is CRESTVIEW.

FILED
14 MAY 19 PM 12:15
STATE
TALLAHASSEE, FLORIDA

OR

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

OR

The electronic transmission of the record was defective.

Wendy Byford WENDY BYFORD 5/14/2014
Signature of Authorized Representative Date

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