

L14000132135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

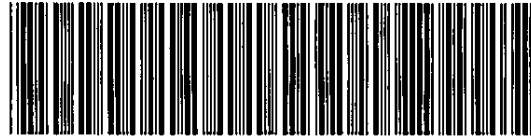
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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SEP 12 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Virtual Game Media 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:

Petar Petrov
Name of Person

Virtual Game Media LLC
Firm/Company

16001 Collins Ave Apt #1505
Address

Sunny Isles Beach Florida 33160
City/State and Zip Code

wreilers@eilerslawgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Eilers at (786) 247-2624
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

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 DEPARTMENT OF STATE

**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: Virtual Game Media LLC

SECOND: The Florida Document number of the limited liability company is: L14000132135

THIRD: Document to be corrected is:
Change title of the managing member from DPST to MGR

(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:

The article was filed as DPST instead of MGR

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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.

Signature of Authorized Representative

09/03/2014
Date

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