

L15000028027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

1. Burch MAR - 5 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEREDITH MANAGEMENT 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:

PATRICIA MEREDITH

Name of Person

Meredith Management Solutions

Firm/Company

712 S. HOWARD AVENUE APT 420

Address

TAMPA FL 33606

City/State and Zip Code

PJ_MEREDITH@HOTMAIL.COM

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

For further information concerning this matter, please call:

PATRICIA MEREDITH

Name of Person

at (813) 951 4410

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: MEREDITH MANAGEMENT
SOLUTIONS LLC

SECOND: The Florida Document number of the limited liability company is: L15000028027

THIRD: Document to be corrected is:

NAME AND ADDRESS of PERSON AUTHORIZED TO MANAGE LLC

(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:

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TALLAHASSEE, FLORIDA

OR

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

I forgot to put myself as an MGR (manager) of the Company.
Please add Patricia Meredith 712 S. Howard Ave Apt 420
Tampa FL 33606 as the manager of Meredith Management
Solutions LLC

OR

- ☐ The electronic transmission of the record was defective.

P. Meredith
Signature of Authorized Representative

2/18/15
Date

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