

U6000002116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

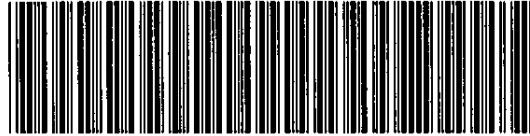
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 APR 26 PM 3:36

JUN 29 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2016

MICHELE HAFT HUDSON
5846 S FLAMINGO ROAD STE 199
COOPER CITY, FL 33330

SUBJECT: SIRE HOLDINGS, LLC
Ref. Number: L16000002116

2016 JUN 28 PM 3:58
TALLAHASSEE, FLORIDA

We have received your document for SIRE HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 516A00008697

16 APR 26 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SIRE HOLDINGS, 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:

MICHELE HAFT HUDSON

Name of Person

SIRE HOLDINGS, LLC

Firm/Company

5846 S FLAMINGO RD, SUITE 199

Address

COOPER CITY, FL 33330

City/State and Zip Code

SIREhomes@gmail.com

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

For further information concerning this matter, please call:

Michele Haft Hudson

Name of Person

954

Area Code

655-7020

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

16 APR 26 PM 3:36
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FLORIDA

**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: SIRE HOLDINGS, LLC

SECOND: The Florida Document number of the limited liability company is: L16000002116

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:

The name of Manager/Member/Registered Agent is incorrectly shown as "HAFT HUDSON, MICHELE" and it should be "HUDSON, MICHELE HAFT"

Haft is the middle name, not part of the last name, but the whole middle name "Haft" should be shown; not the initial "H".

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

Date

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

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

FILED
STATE
TALLAHASSEE
16 APR 26 PM 3:36