11700077250

(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:								

Office Use Only



400299626164

06/05/17--01017--009 **25.00

SECRETARY OF STATE

J. HARRIE

COVER LETTER

то:	Registration Sec Division of Corp									
SURTE	CT. 51 M	Cars 1	10		N.	س,	•		4	•
SUBJECT: 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:										
_ <u>A</u> '	leksand	Name of Person	om id	J	•	_				
		Firm/Company		- 		_				
_ 2	426 Tu	Address	Ave	aç	* # #	2				
	Dayton	y/State and Zip Co	ode '	FL	32	81				
Lyubimovaleksandr @amail. com U-mail address: (to be used for future annual reportabilification)										
For further information concerning this matter, please call:										
Alex	Sandr Name of	<u>iubimo</u> Person	N	<u> </u>	386 Area Code	_/	84° Daytim	3 - 1 ie Telep	O2 hone N	78 Jumber
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 I Certificate of St		S55	Filing Fee l Copy	e &	Certifi	0 Filing cate of ed Cop	Status	: &
CR2E06	62 (9/15)									



June 8, 2017

ALEKSANDR LIUBIMOV 2426 TULANE AVE APT 2 DAYTONA BEACH, FL 32118

SUBJECT: SLM CARS LLC Ref. Number: L17000077250

We have received your document for SLM CARS 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):

Please enter the type of document to be corrected in the third section of the form.

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

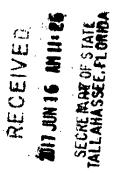
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00011650

OIT JUN 16 AN IO: 15



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: need to be changed The Florida Document number of the limited liability company is: SECOND: Document to be corrected is: Articles of Organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT D Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Cass. Dame OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> \Box The electronic transmission of the record was defective. Signature of Authorized Representative 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)