## L2000008153

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## COVER LETTER

Division of Corporations AAA SPA FACTORY LLC 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: DAMON BARKER Name of Person AAA SPA FACTORY LLC Firm/Company 2334 ROCK RD Address FORT PIERCE, FL 34945 City/State and Zip Code martyrhoat@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 772 882-0377 DAMON BARKER Daytime Telephone Number Name of Person Street Address: **Mailing Address:** Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □\$25 Filing Fee ☐ \$30 Filing Fee & □ \$60 Filing Fee. □\$55 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E062 (9/15)

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE 2021 0CT 22 A'1 8: 03

Letter Number: 221A00023567

Division of Corporations

September 29, 2021

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DAMON BARKER 2334 S ROCK RD FT. PIERCE, FL 34945

SUBJECT: AAA SPA FACTORY LLC

Ref. Number: L20000081531

We have received your document for AAA SPA FACTORY LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Irene Albritton Regulatory Specialist III

www.sunbiz.org

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

<u> 1631</u>	The name of the limited liability company is:  AAA SPA FACTORY LLC
SECON	MD: The Florida Document number of the limited liability company is: 120000081531
THIRD	Example 2 : Document to be corrected is: MANAGER OF LLC
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
Z.	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
	THE FOLLOWING MANAGER HAS RETIRED HER POSITION EFFECTIVE AUGUST 1, 2021
	MARTHA RHOAT, 2334 S ROCK RD, FORT PIERCE, FL 34945
	THE NEW MANAGER IS DAMON BARKER EFFECTIVE AUGUST 1, 2021, SAME ADDRESS.
	<u>OR</u>
<b>3</b>	OR  Was defectively signed. The manner in which the document was defectively signed and the appropriate correction as follows:
)	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction
3	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction
2	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction as follows:

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

Thereby 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.

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)