

L14000135742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

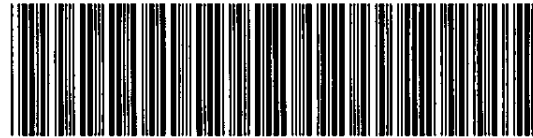
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT - 2 2014

WASHINGTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Alex. P. 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:

Pascalie Alexandre  
Name of Person

Alex. P. LLC  
Firm/Company

942 NW 110th Ave  
Address

Plantation, FL 33324  
City/State and Zip Code

alexandre.pascalie@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pascalie Alexandre at (501) 914-6996  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 25, 2014

PASCALIE ALEXANDRE  
942 NW 110TH AVE  
PLANTATION, FL 33324

SUBJECT: ALEX.P.LLC  
Ref. Number: L14000135747

We have received your document for ALEX.P.LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

You filed the State of Correction out in the wrong section, you must list information in the highlighted section.

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.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 414A00020638

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: Alex P LLC

SECOND: The Florida Document number of the limited liability company is: 114000135747

THIRD: Document to be corrected is:

(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:

Please remove dots from company name  
is should read Alex P LLC.  
please change my title from Pres. to  
member.

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]  
Signature of Authorized Representative

10/1/2014  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 OCT -1 AM 10:25

FILED

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