

L17000177231

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

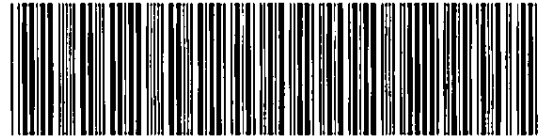
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/28/17--01015--003 \*\*25.00

17 OCT 26 AM 8:49  
Filing Office

OCT 26 2017

Y SULKER

**FAX COVER SHEET**

TO

COMPANY

FAXNUMBER 18502456030

FROM SipXentral- Powered By NewCom

DATE 2017-10-25 20:41:05 GMT

RE L17000177231 / FH QUANTUM, LLC

**COVER MESSAGE****ATTN: Yasmin**

Yasmin:

As a follow-up to our telephone conversation earlier this month, I am now enclosing a copy of our check #2207 (front and back) that shows it was cashed/deposited on 8/30/17 and has cleared our bank.

I have also attached a COPY of the original paperwork (Statement of Correction) that was submitted with the check.

Please research this and advise me once you have located the paperwork and updated our Articles of Incorporation for **FH QUANTUM, LLC** to reflect the correct name of **FOX RE HOLDINGS, LLC** as the Registered Agent and Manager.

Thank you.

*Loretta J. Wise***LIENBASE**

200 S. Park Road, Suite 425

Hollywood, FL 33021

T: (954) 417-1342 / Direct

F: (954) 963-9468

Email: [loretta@lienbase.com](mailto:loretta@lienbase.com)*Go Green ..... Protect our Environment - Only print if necessary.*

2017 OCT 25 PM 4:57

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: **FH QUANTUM, 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:

**Loretta J. Wise**

Name of Person

**% LIENBASE**

Firm/Company

**200 S Park Road, Suite 425**

Address

**Hollywood, FL 33021**

City/State and Zip Code

**loretta@lienbase.com**

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

For further information concerning this matter, please call:

**Loretta Wise**

Name of Person

at **954**

Area Code

**417-1342**

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: FH QUANTUM, LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000177231

**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:

Identified another FL LLC as RA and Mgr before it was approved by State. It was denied as it was not available.

We have now corrected the name to FOX RE HOLDINGS, LLC and need to make this correction to the Articles of Organization for FH Quantum, LLC.

**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

JOSHUA W. SCHRAGER, MGR.

Date

8/23/17

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

JOSHUA W. SCHRAGER, MGR.

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)