

LO1000018145



Ms Lynda Wellman
7540 Loch Ness Dr
Miami Lakes, FL 33014-6014

City/State/Zip

Phone #

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-11/01/01--01024--005
*****30.00 *****30.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
01 NOV - 1 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LO1-18145
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Examiner's Initials

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
POSTAL SECURITY SYSTEMS LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. ¹⁾ The incorrect statement, ²⁾ the reason the statement is incorrect, ³⁾ and the corrected statement are as follows:

1) NAME OF "MANAGER" IS RICHARD R. WELLMAN

2) INFORMATION WAS INCORRECTLY SUBMITTED.

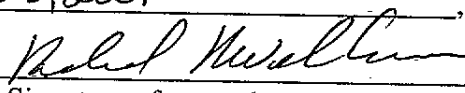
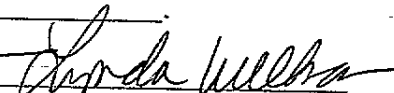
3) NAME OF "MANAGER" IS LYNDA WELLMAN -- NOT RICHARD R. WELLMAN.
"MEMBER" 6175 N.W. 153 ST. #229 MIAMI LAKES - FL 33014

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

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01 NOV -1 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated: OCT. 26, 2001

 
Signature of a member or authorized representative of a member

RICHARD R. WELLMAN LYNDA WELLMAN
Typed or printed name of signee

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

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L01000018145
FILED
October 22, 2001
Sec. Of State**

Article I

The name of the Limited Liability Company is:
POSTAL SECURITY SYSTEMS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
6175 N.W. 153 STREET
SUITE 229
MIAMI LAKES, FL. US 33014

The mailing address of the Limited Liability Company is:
6175 N.W. 153 STREET
SUITE 229
MIAMI LAKES, FL. US 33014

Article III

The name and Florida street address of the registered agent is:
ANABEL ESTEVEZ
6175 N.W. 153 STREET
SUITE 229
MIAMI LAKES, FL. US 33014

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: ANAGEL ESTEVEZ

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TALLAHASSEE, FLORIDA

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L01000018145
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October 22, 2001
Sec. Of State

Article IV

The name and address of members/managers are:

Title: MGR
RICHARD R. WELLMAN MR.
6175 N.W. 153 STREET, SUITE 229
MIAMI LAKES, FL. US 33014

Signature of member or an authorized representative of a member

Signature: RICHARD R. WELLMAN

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TALLAHASSEE, FLORIDA