

L03000057426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

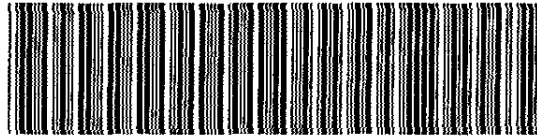
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200026963812

01/15/04--01042--010 **43.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 15 AM 9:01

FILED

L03-57426
of

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A⁺ Demolition, LLC
(Name of Corporation)

DOCUMENT NUMBER: L 030000 57426

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARIDAD S. Gonzalez, Esq.
(Name of Person)

Law Offices of Caridad S. Gonzalez, PA
(Name of Firm/Company)

4623 NW 53 AVE, Box 2
(Address)

GAINESVILLE, FL 32606
(City/State and Zip Code)

For further information concerning this matter, please call:

Caridad Gonzalez at (352) 373-3991 or (352) 246-7037 cell phone
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee & Certified Copy

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

FILED
JAN 11 AM 9:01
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 22, 2004

CARIDAD S. GONZALEZ
4623 NW 53 AVENUE, BOX 2
GAINESVILLE, FL 32606

SUBJECT: A+ DEMOLITION, LLC
Ref. Number: L03000057426

We have received your document for A+ DEMOLITION, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 104A00003920

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 15 AM 9:01

FILED

**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:

(L03000057426)
At Demolition, 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. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Change NAME of the LLC to
At Contracting, LLC

OR



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

Dated: _____

X Scott K. Sapp / Pres
Signature of a member or authorized representative of a member

Scott K. SAPP, Manager / member
Typed or printed name of signee

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)

CR2B062(3/00)

paid already

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 15 AM 9:01

FILED

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

L03000057426
FILED 8:00 AM
December 31, 2003
Sec. Of State

Article I

The name of the Limited Liability Company is:

A+ DEMOLITION, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

8490 NE 61ST PLACE
BRONSON, FL. 32621

The mailing address of the Limited Liability Company is:

8490 NE 61ST PLACE
BRONSON, FL. 32621

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

SCOTT K SAPP
8490 NE 61ST PLACE
BRONSON, FL. 32621

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: SCOTT K. SAPP

Article V

The name and address of managing members/managers are:

Title: MGR
SCOTT K SAPP
8490 NE 61ST PLACE
BRONSON, FL. 32621

L03000057426
FILED 8:00 AM
December 31, 2003
Sec. Of State

Article VI

The effective date for this Limited Liability Company shall be:

12/31/2003

Signature of member or an authorized representative of a member

Signature: SCOTT K. SAPP