

L04 0000 38430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

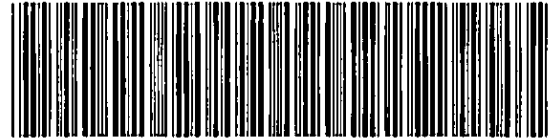
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/21--01047--017 **25.00

FILED
2021 SEP 13 AM 11:10
VOID
CLERK OF SUPERIOR COURT
STATE OF NEW YORK
JULIA A. GARCIA

SHOULD NOT HAVE FILED. CAN'T CORRECT AN ANNUAL REPORT.
MUST FILE AMENDED ANNUAL REPORT OR AN AMENDMENT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A Lane 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:

Keith R Johnson

Name of Person

A Lane LLC

Firm/Company

3691 SR 580 W Ste H

Address

Oldsmar, FL 34677

City/State and Zip Code

admin@tnttampa.com

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

For further information concerning this matter, please call:

Keith R Johnson

727

698-7479

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

VOID

**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: A Lane LLC

SECOND: The Florida Document number of the limited liability company is: L04000038430

THIRD: Document to be corrected is: 2021 Annual Report

(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:

the MGRM was incorrectly listed as KREJ IRRV TRUST #2

a New Employee used last year's Annual Report not realizing that the Members had changed

MGRM should be Keith R Johnson, and members listed should be Arianna LM Johnson and Gianna M Johnson

OR

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

Harold Johnson electronically signed when Keith Johnson should have been the signatory

OR

- ☒ The electronic transmission of the record was defective.

Keith Johnson

Signature of Authorized Representative

9-09-2021

Date

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

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