

105000063869

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(Address)

(City/State/Zip/Phone #)

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Correction w/
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M. HODGES

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05 JUL 19 PM 3:36

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THRUGRACE INTERNATIONAL ENTERPRISE, L.L.C.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CLAUDETTE O. BATTS

(Name of Person)

(Firm/Company)

17800 SW 83 AVE

(Address)

VILLAGE OF PALMETTO BAY, FLORIDA 33157

(City/State and Zip Code)

For further information concerning this matter, please call:

CLAUDETTE O. BATTS

(Name of Person)

at (305) 253-0487

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

STREET ADDRESS:

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

MAILING ADDRESS:

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

**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:
"THRU- GRACE" INTERNATIONAL ENTERPRISE, L.L.C.

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:
The name of the LLC is spelled incorrectly. It does not have an hyphen in the
middle of the name and it is not in inverted comas. The correct name is:

Thrugrace International Enterprise, L.L.C.

OR

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

Dated: JULY 12, 2005


Signature of a member or authorized representative of a member

CLAUDETTE O. BATTS

Typed or printed name of signee

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

05 JUL 18 PM 3:34

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

"thru- Grace" International Enterprise, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

17800 SW 83 Ave
Village of Palmetto Bay
Florida 33157

Mailing Address:

17800 SW 83 Ave
Village of Palmetto Bay
Florida 33157

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

CLAUDETTE O. BATTS

Name

17800 SW 83 AVE

Florida street address (P.O. Box **NOT** acceptable)

VILLAGE OF PALMETTO BAY, FL 33157

City, State, and Zip

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 as provided for in Chapter 608, F.S.

Claudette O. Batts
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

CLAUDETTE O.BATTS

17800 SW 83 AVE

VILLAGE OF PALMETTO BAY, FL.33157

MGRM

MICHAEL F. BATTS

17800 SW 83 AVE

VILLAGE OF PALMETTO BAY, FL 33157

MEMBER

SARAH N. BATTS

17800 SW 83 AVE

VILLAGE OF PALMETTO BAY, FL 33157

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CLAUDETTE O. BATTS

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)