

LOS000092916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

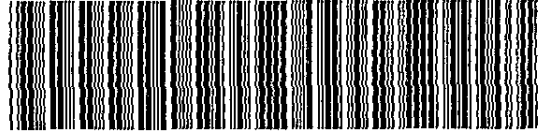
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05 OCT -7 AM 9:38
STATE
FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HANDIWORK CONNECTION AGENCY, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Ricardo Calzada, II
(Name of Person)

Calzada, Hamner & Wilson, P.L.
(Firm/Company)

809 Irma Avenue, Suite 3
(Address)

Orlando, FL 32803
(City/State and Zip Code)

For further information concerning this matter, please call:

Ricardo Calzada, II at (407) 649-8389 x107
(Name of Person) (Area Code & 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:
HANDIWORK CONNECTION AGENCY, 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:
The name of the company is incorrect as it omitted an "S"
The name of the company should be:
HANDIWORKS CONNECTION AGENCY, LLC
↑
add an "S."

OR

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

05 OCT -7 AM 9:38
SECTION 608.4115
STATE OF FLORIDA

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Dated: 9/27/05

Ricardo Calzada, II
Signature of a member or authorized representative of a member

Ricardo Calzada, II

Typed or printed name of signee

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

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

L05000092916
FILED 8:00 AM
September 21, 2005
Sec. Of State
mhodges

Article I

The name of the Limited Liability Company is:
HANDIWORK CONNECTION AGENCY, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5040 DOCKSIDE DRIVE
ORLANDO, FL. 32822

The mailing address of the Limited Liability Company is:
P.O BOX 571145
ORLANDO, FL. 32857

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:
RICARDO CALZADA II
809 IRMA AVENUE
SUITE 3
ORLANDO, FL. 32803

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: RICARDO CALZADA, II

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TALLAH. FLORIDA

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Article V

The name and address of managing members/managers are:

Title: MGRM
RUBEN PALACIOS
5040 DOCKSIDE DRIVE
ORLANDO, FL. 32822 US

Signature of member or an authorized representative of a member

Signature: RUBEN PALACIOS

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