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FILED
05 OCT 31 PM 1:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NO \$

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Northwest Florida Eye Institute, 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:

Gayla D. Rowland
(Name of Person)

Northwest Florida Eye Institute, P.L.
(Firm/Company)

946 Bucyrus Lane
(Address)

Pensacola, FL 32533
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeff Rowland at (850) 380-7181
(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

**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:
Northwest Florida Eye Institute, 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 Limited Liability Company needs to be changed to: Northwest Florida Eye Institute, P.L. We were unaware of Chapter 621
of the FL Statutes at the time of filing. The Company's specific purpose falls into the classification of a professional service as defined in Chapter 621.03 (1)
of the Florida Statutes. In addition, Article 5 of the Articles of Organization needs to be amended to remove Jeff Rowland as a Member of the company, because,
he does not meet the qualifications to be a member of the P.L.L.C. All of the other information in the Articles of Organization is correct as stated.

OR

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

Dated: October 18th, 2005

Gayla D. Rowland
Signature of a member or authorized representative of a member

Gayla D. Rowland

Typed or printed name of signee

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

05 OCT 31 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

L05000094356
FILED 8:00 AM
September 26, 2005
Sec. Of State
Tallahassee

Article I

The name of the Limited Liability Company is:
NORTHWEST FLORIDA EYE INSTITUTE, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
946 BUCYRUS LANE
CANTONMENT, FL. US 32533

The mailing address of the Limited Liability Company is:
946 BUCYRUS LANE
CANTONMENT, FL. US 32533

Article III

The purpose for which this Limited Liability Company is organized is:
TO PROVIDE COMPREHENSIVE EYE CARE INCLUDING EYE
EXAMINATIONS, SURGERIES AND RELATED SERVICES.

Article IV

The name and Florida street address of the registered agent is:
JEFF ROWLAND
946 BUCYRUS LANE
CANTONMENT, FL. 32533

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: JEFF ROWLAND