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(R	equestor's Name)			
(A	ddress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(D	ocument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer	<u> </u>		
2/27		Hior		
EFFECTIVE DATE				
Office Use Only				

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M. HODGES

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Lifestyles 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:	
Richard H. Kutcher (Name of Person)	
Lifestles LLC (Firm/Company)	
960 South Sable Civile	
Margare 33063 (City/State and Zip Code)	
For further information concerning this matter, please call:  Picharc Kutcher at (954) 803.6678	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 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 \$\Bigcup \$30 Filing Fee & \$\Bigcup \$55 Filing Fee & \$\Bigcup \$560 Filing Fee,\$  Certificate of Status Certified Copy 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 <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST:	The name of the limited liability company is:	3 LI	<u>L</u> <
SECOND:	The articles of organization or the application to transact business		
(CHECK	THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u>ATEMEN</u>	T
_	ains an incorrect statement. The incorrect statement, the reason the statement, and the corrected statement are as follows:	ement is	
<u>a</u>	dd effective date of: 11	06	_ <del>_</del>
<u>OR</u>			
	defectively signed. The manner in which the document was defectively ppropriate correction are as follows:	SECRETARY ALLAHASSE	05 DEC 27
•		TATE	A:    H
Dated:	secenter 19, 2005		
	Signature of a member or authorized representative of a member		
(	Richard H. Kutcher		
_	Typed or printed name of signee		
	Filing Fee: \$25.00		

Certified Copy:

\$30.00 (optional)

CR2E062 (08/05)

# Electronic Articles of Organization For Florida Limited Liability Company

L05000117494 FILED 8:00 AM December 08, 2005 Sec. Of State dcushing

#### Article I

The name of the Limited Liability Company is: LIFESTYLES LLC

#### Article II

The street address of the principal office of the Limited Liability Company is: 5960 SOUTH SABLE CIRCLE MARGATE, FL. US 33063

The mailing address of the Limited Liability Company is: 5960 SOUTH SABLE CIRCLE MARGATE, FL. US 33063

#### **Article III**

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

#### Article IV

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

RICHARD H KUTCHER 5960 SOUTH SABLE CIRCLE MARGATE, FL. 33063

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: RICHARD H KUTCHER

## Article V

The name and address of managing members/managers are:

Title: MGR RICHARD H KUTCHER 5960 SOUTH SABLE CIRCLE MARGATE, FL. 33063 US

Signature of member or an authorized representative of a member Signature: RICHARD H KUTCHER

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