

Lo 1000 12143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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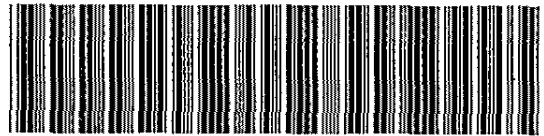
(Business Entity Name)

(Document Number)

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AQ

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CUSTOM FRAMING, 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:

BOBBY FARRELL

(Name of Person)

CUSTOM FRAMING, LLC

(Firm/Company)

1162 FLEMING BRIDGE ROAD

(Address)

MILTON, FL 32570

(City/State and Zip Code)

For further information concerning this matter, please call:

BOBBY FARRELL

(Name of Person)

at ( 850 ) 665-1250

(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

CR2E062 (08/05)

2007 FEB -7 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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:  
CUSTOM FRAMING, 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 SHOULD READ GATOR CUSTOM FRAMING, LLC

THE ADDRESS OF THE LIMITED LIABILITY COMPANY SHOULD BE

1162 FLEMING BRIDGE ROAD, MILTON, FL 32570

**OR**

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

Dated: FEBRUARY 5, 2007

Brian Tucker  
Signature of a member or authorized representative of a member

BRIAN TUCKER  
Typed or printed name of signee

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

FILED  
2007 FEB -7 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

107000012143  
FILED 8:00 AM  
February 01, 2007  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:  
CUSTOM FRAMING, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1162 SLEMING RIDGE ROAD  
MILTON, FL. 32570

The mailing address of the Limited Liability Company is:  
1162 SLEMING RIDGE ROAD  
MILTON, FL. 32570

**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:  
BOBBY FARRELL  
1162 SLEMING RIDGE ROAD  
MILTON, FL. FL.

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: BOBBY FARRELL