

L07000017755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

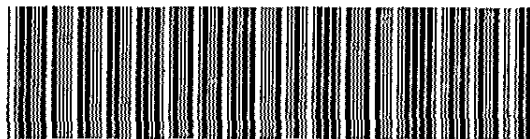
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600089932756

03/02/07--01008--015 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR - 2 PM 2:01

J. BRYAN MAR - 5 2007

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** R. Scott Baker Consulting, L.L.C.

(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:

R. Scott Baker

(Name of Person)

(Firm/Company)

6037 Estates Drive

(Address)

North Port, FL, 34286

(City/State and Zip Code)

For further information concerning this matter, please call:

R. Scott Baker

(Name of Person)

at ( 941 ) 626-1813

(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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR -2 PM 2:01

**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:  
R. Scott Baker Consulting, 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:  
The articles failed to mention that Charles H. Hickox, P.O. Box 994, Ocala, FL, 34478

is also a Manager, taking the position of Secretary and Treasurer

\_\_\_\_\_  
\_\_\_\_\_

Dated: February 27th, 2007



Signature of a member or authorized representative of a member

R. Scott Baker

Typed or printed name of signee

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR - 2 PM 2:01

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

L07000017755  
FILED 8:00 AM  
February 15, 2007  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:

R. SCOTT BAKER CONSULTING, L.L.C.

**Article II**

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

6037 ESTATES DRIVE  
NORTH PORT, FL. US 34286

The mailing address of the Limited Liability Company is:

6037 ESTATES DRIVE  
NORTH PORT, FL. US 34286

**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:

ROBERT S BAKER  
6037 ESTATES DRIVE  
VENICE, FL. 34286

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: R. SCOTT BAKER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR -2 PM 2:01

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ROBERT S BAKER  
6037 ESTATES DRIVE  
VENICE, FL. 34286

L07000017755  
FILED 8:00 AM  
February 15, 2007  
Sec. Of State  
tcline

### **Article VI**

The effective date for this Limited Liability Company shall be:

02/15/2007

Signature of member or an authorized representative of a member

Signature: R. SCOTT BAKER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR - 2 PM 2:02