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J. BRYAN MAR - 5 2007.

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: VICTORIA, LLC				
(Name of Limited Liability Co	mpany)			
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	g:			
SANDOR MENYHART (Name of Person)	<del>-</del> ·			
VICTORIA, LLC (Firm/Company)	<b>~</b> ·			
555 LAYE CYPLESS CIL.	e generalis			
(Address)	All the second of the second o			
OLDSMAR FL 34677				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
SANDOR MENYHART at (717 (Name of Person) at (717	776 86 50  Daytime Telephone Number)			
(Name of 1 classif) (Area Code a	e Dayume Telephone Numbers			
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 \$\ Certificate of Status \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ \$60 Filing Fee, Certificate of Status &			

# 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: VICTODIA	HC	
SECO:			
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	ATEMENT	
	Contains an incorrect statement. The incorrect statement, the reason the state incorrect, and the corrected statement are as follows:  INCORPECT APPRESS: 1945 PNELLAS AVE		_
	THEPON SPRINGS FL 34689		_
	-THE COPPECT ADDRESS IS: 555 LAKE O	CANGE C	.2
	CIDCLE OLDSMAR FL 34877		_
	<u>OR</u>		
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed and	<b>D</b>
			NSE SE
		MAR.	왕
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		2: 02	AFF
Dated:	01-18-2007	10	35
Dates.			
	Signature of a member of authorized representative of a member		
	SXUDOR HENYNXRT HGR		
	Typed or printed name of signee		
	Filing Fee: \$25.00		

Certified Copy:

\$30.00 (optional)

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

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#### Article I

The name of the Limited Liability Company is: VICTORIA, LLC

#### Article II

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

1945 PINELLAS AVE S. TARPON SPRINGS, FL. 34689

The mailing address of the Limited Liability Company is:

1945 PINELLAS AVE S. TARPON SPRINGS, FL. 34689

#### 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:

SANDOR MENYHART 1945 PINELLAS AVE S. TARPON SPRINGS, FL. 34689

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: SANDOR MENYHART

SECRETARY OF STATIONS LIVISION OF CORPORATIONS 07 MAR -2 PM 2: 02

#### Article V

The name and address of managing members/managers are:

Title: MGR SANDOR MENYHART 1945 PINELLAS AVE S. TARPON SPRINGS, FL. 34689

Title: MGR MENYHART JUDIT 1945 PINELLAS AVE S. TARPON SPRINGS, FL. 34689

Signature of member or an authorized representative of a member Signature: SANDOR MENYHART

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