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#### **COVER LETTER**

Registration Section

TO:

CR2E062 (08/05)

Division of Corporations			
SUBJECT: THE WATERMAN OF S	SOUTH FLORIDA LI		
(Name of Limited Liability Company)			
Dear Sir or Madam:			
The enclosed Articles of Correction and fee(s) are submitted for filing	<b>;</b> .		
Please return all correspondence concerning this matter to the following	ng:		
ANTHONY LOSCHIAUD TIT (Name of Person)	_		
THE WATERMAN OF SOUTH (Firm/Company)	_ FlorIDA		
2497 S.W Grotto Cie.	_		
POIT. SAINT LUCIE. 34 (City/State and Zip Code)	<u>9</u> 53-2925		
For further information concerning this matter, please call:			
Anthony Loschiauo at 772 (Name of Person) (Area Code	240-0181 & 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 & S30 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		

### ARTICLES OF CORRECTION FOR

#### FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

08 JAN 17 PH 12: 15

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 STATE business days to correct the attached articles of organization or application to transact business in Florida.

FIRST	T: The name of the limited liability company is: FLORDIA LLC.		
SECO	ND: The articles of organization or the application to transact business		
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT			
വ	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  ON YOUR WEBSITE MY name of compa  IS The Waterman of South Floroid.		
	FLORIDA IS SPECIED WRONG THE CORRECTS	spalling	
	IS: THE WATERMAN OF SOUTH FRORTDA	-L-LC	
	OR FLORIDA Wrong FLORIDA Unight Threed it Spalled Right.  Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	Right	
Dated:	Signature of a member or authorized representative of a member  Anthony Los Ltifauo TTT  Typed or printed name of signee  Filing Fee: \$25.00		

\$30.00 (optional)

Certified Copy:

## Electronic Articles of Organization For Florida Limited Liability Company

L08000000180 FILED 8:00 AM January 02, 2008 Sec. Of State dbruce

#### **Article I**

The name of the Limited Liability Company is: THE WATERMAN OF SOUTH FLORDIA, LLC

#### Article II

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

2497 SW GROTTO CIR PORT SAINT LUCIE, FL. 34953

The mailing address of the Limited Liability Company is:

2497 SW GROTTO CIR PORT SAINT LUCIE, FL. 34953

#### **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:

ANTHONY LOSCHIAVO III 2497 SW GROTTO CIR PORT SAINT LUCIE, FL. 34953

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: ANTHONY LOSCHIAVO III

#### **Article V**

. The name and address of managing members/managers are:

Title: MGRM ANTHONY LOSCHIAVO III 2497 SW GROTTO CIR PORT SAINT LUCIE, FL. 34953

Signature of member or an authorized representative of a member Signature: ANTHONY LOSCHIAVO III

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