

608000041792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2008 MAY - 1 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

MAY - 2 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brigman Financial Management Advisors, 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:

Steve Barile

(Name of Person)

Scott Nelson CPA

(Firm/Company)

4890 W. Kennedy Blvd # 240

(Address)

Tampa, FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Barile

(Name of Person)

at (813) 286-7946

(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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAY - 1 PM 12:32

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**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:

Brigman Financial Management Advisors 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 Zip code for the street & mailing address was originally stated as 33484

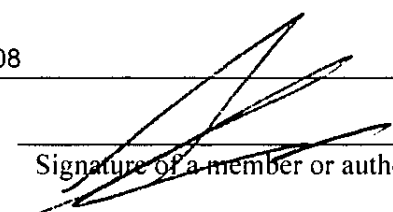
The Zip code for the street & mailing address should be 33446

OR



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

Dated: 4-28-08



Signature of a member or authorized representative of a member

Scott Nelson

Typed or printed name of signee

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

2008 MAY -1 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

L08000041792
FILED 8:00 AM
April 25, 2008
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
BRIGMAN FINANCIAL MANAGEMENT ADVISORS, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
7581 DOUBLETON DRIVE
DELRAY BEACH, FL. US 33484

The mailing address of the Limited Liability Company is:
7581 DOUBLETON DRIVE
DELRAY BEACH, FL. US 33484

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:
SCOTT F NELSON
4890 W. KENNEDY BLVD
240
TAMPA, FL. 33609

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: SCOTT F NELSON

Article V

The name and address of managing members/managers are:

Title: MGR
CHARLES D BRIGMAN
7581 DOUBLETON DRIVE
DELRAY BEACH, FL. 33484 US

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FILED 8:00 AM
April 25, 2008
Sec. Of State
nculligan

Signature of member or an authorized representative of a member

Signature: SCOTT F NELSON