

L08000048426

(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:

A. LUNT

MAY 21 2008

EXAMINER

Office Use Only



300129010693

05/20/08--01021--007 **30.00

FILED
2008 MAY 20 P 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JBD DIRECT, 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:

GAYLE COHEN

(Name of Person)

JBD DIRECT, LLC

(Firm/Company)

502 SUNPORT LANE, SUITE 400

(Address)

ORLANDO, FL 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN COHEN

(Name of Person)

at

954, 873-3985

(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)

2008 MAY 20 P 3:11
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:
JBD DIRECT, 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 ADDRESS ON THE ORIGINAL ARTICLES OF organization (SEE COPY ATTACHED)

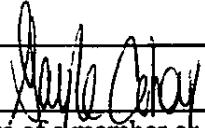
IS INCORRECT. PLEASE CHANGE TO:

502 SUNPORT LANE, SUITE 400, ORLANDO, FL 32809

OR

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

Dated: MAY 19TH, 2008


Signature of a member or authorized representative of a member

GAYLE COHEN

Typed or printed name of signee

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

FILED
MAY 20 P 3:18
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

**L08000048426
FILED 8:00 AM
May 14, 2008
Sec. Of State
gmcleod**

Article I

The name of the Limited Liability Company is:

JBD DIRECT, LLC

Article II

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

512 SUNPORT LANE
SUITE 400
ORLANDO, FL. US 32809

The mailing address of the Limited Liability Company is:

512 SUNPORT LANE
SUITE 400
ORLANDO, FL. US 32809

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:

GAYLE COHEN
512 SUNPORT LANE
SUITE 400
ORLANDO, FL. 32809

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: GAYLE COHEN

Article V

The name and address of managing members/managers are:

Title: MGR
GAYLE COHEN
512 SUNPORT LANE, SUITE 400
OLANDO, FL. 32809 US

L08000048426
FILED 8:00 AM
May 14, 2008
Sec. Of State
gmcleod

Signature of member or an authorized representative of a member

Signature: GAYLE COHEN