

608000057956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

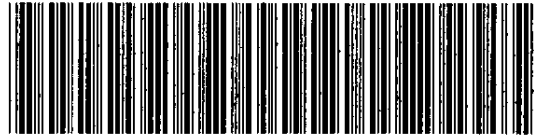
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2008 JUN 18 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN 19 2008

EXAMINER

McAfee & Taft

A PROFESSIONAL CORPORATION

10TH FLOOR • TWO LEADERSHIP SQUARE
211 NORTH ROBINSON • OKLAHOMA CITY, OK 73102-7103
(405) 235-9621 • FAX (405) 235-0439
www.mcafeetaft.com

WRITER DIRECT
(405) 552-2362
FAX (405) 235-0439
jane.henson@mcafeetaft.com

June 17, 2008

FEDERAL EXPRESS

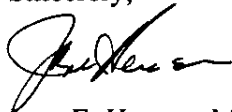
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Ladies and Gentlemen:

Enclosed for filing are Articles of Correction on RUBAS LLC (an original and one copy). Also enclosed are 1) Articles of Organization filed on June 11, 2008; 2) our check for \$55 to cover the filing and certified copy fees; and 3) a prepaid Federal Express envelope for return of filing evidence.

Thank you for your assistance. If you have questions about the filing please give me a call at 405/552-2362.

Sincerely,



Jane E. Henson-Martin
Legal Assistant

Enclosures

FILED
2008 JUN 18 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUBAS 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:

Jane Henson

(Name of Person)

McAfee & Taft A Professional Corporation

(Firm/Company)

10th Fl, Two Leadership Square, 211 N. Robinson

(Address)

Oklahoma City, OK 73102

(City/State and Zip Code)

For further information concerning this matter, please call:

Jane Henson

(Name of Person)

at (405)

552-2362

(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
2008 JUN 18 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:
RUBAS 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 Name and Address of the Manager was submitted as: Eden B. Pourchot, 880 Wolfe Brook Terrace,

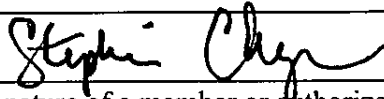
Weston, FL, 33331, US. The city and zip code were incorrect.

The Name and Address of the Manager is corrected to read: Eden B. Pourchot, 880 Wolfe Brook Terrace,
Winter Park, FL, 32792, US.

OR

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

Dated: June 17, 2008



Signature of a member or authorized representative of a member

Stephanie Chapman, Authorized Person

Typed or printed name of signee

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

2008 JUN 18 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

L08000057956
FILED 8:00 AM
June 11, 2008
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:
RUBAS LLC

Article II

The street address of the principal office of the Limited Liability Company is:
880 WOLFE BROOK TERRACE
WINTER PARK, FL. US 32792

The mailing address of the Limited Liability Company is:
880 WOLFE BROOK TERRACE
WINTER PARK, FL. US 32792

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:
NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL. 33331

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: BRENDA L. WHITE, ASSISTANT SECRETARY

Article V

The name and address of managing members/managers are:

Title: MGR
EDEN B POURCHOT
880 WOLFE BROOK TERRACE
WESTON, FL. 33331 US

L08000057956
FILED 8:00 AM
June 11, 2008
Sec. Of State
mthomas

Signature of member or an authorized representative of a member

Signature: STEPHANIE CHAPMAN, AUTHORIZED PERSON