

L0800000 81570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

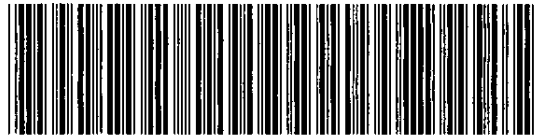
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100134921851

08/28/08--01044--017 **25.00

FILED
08 AUG 28 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

AUG 29 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE SOMA CENTER OF THE SOUTH FLORIDA, 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:

MICHAEL COUPLAND
(Name of Person)

THE SOMA CENTER OF SOUTH FLORIDA
(Firm/Company)

2660 S. OCEAN BLVD # 305 S
(Address)

PALM BEACH, FL 33480
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL COUPLAND at (561) 628 0831
(Name of Person) (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

**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: ~~THE SOMA~~ THE SOMA CENTER OF THE SOUTH FLORIDA, LLC L08000081570

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:

Incorrect = THE SOMA CENTER OF THE SOUTH FLORIDA, LLC
(The above "THE" is a typo)

CORRECT = THE SOMA CENTER OF SOUTH FLORIDA, LLC

OR

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

Dated: 08-27-2008


Signature of a member or authorized representative of a member

MICHAEL COUPLAND

Typed or printed name of signee

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

FILED
08 AUG 28 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

L08000081570
FILED 8:00 AM
August 26, 2008
Sec. Of State
Isellers

Article I

The name of the Limited Liability Company is:
THE SOMA CENTER OF THE SOUTH FLORIDA, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
609 LAKE AVE
LAKE WORTH, FL. 33460

The mailing address of the Limited Liability Company is:
2660 S. OCEAN BLVD
305S
PALM BEACH, . 33480

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:
COUPLAND MICHAEL
2660 S. OCEAN BLVD
305S
PALM BEACH, FL. 33480

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: MICHAEL COUPLAND

FILED
08 AUG 28 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: MGR
DANA COUPLAND
2660 S. OCEAN BLVD, #305S
PALM BEACH, FL. 33480

Title: MGR
ERIN GIRLING
1202 N D STREET
LAKE WORTH, FL. 33460

Title: MGR
RICHARD GIRLING
1202 N D STREET
LAKE WORTH, FL. 33480

Title: MGR
MICHAEL COUPLAND
2660 S OCEAN BLVD, #305S
PALM BEACH, FL. 33480

Signature of member or an authorized representative of a member

Signature: MICHAEL COUPLAND

L08000081570
FILED 8:00 AM
August 26, 2008
Sec. Of State
Isellers

FILED
08 AUG 28 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA