

LO8000113792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

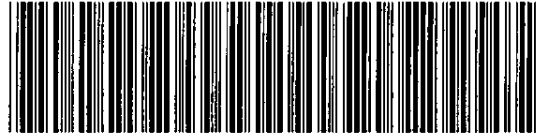
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08 DEC 16 AM 10:30

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

M. THOMAS  
DEC 17 2008  
EXAMINER

LO8-113792

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IN THE HAND'S OF GOD, 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:

Lusant Ordoñez

(Name of Person)

Zenodro Homes at The Retreat, Inc.

(Firm/Company)

600 South Northlake Boulevard, Suite 200

(Address)

Altamonte Springs, Florida 32701

(City/State and Zip Code)

For further information concerning this matter, please call:

Lusant Ordoñez

(Name of Person)

at ( 407 ) 831-4600

(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

FILED  
08 DEC 16 AM 13:30  
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:  
IN THE HAND'S OF GOD, 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:  
We incorrectly added an apostrophe to the word HANDS in the name of the company and it should not contain an apostrophe.

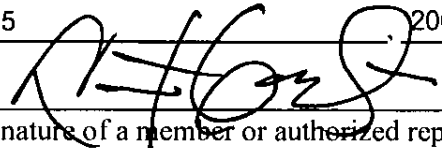
The company name should read "In the Hands of God, LLC" instead of "In the Hand's of God, LLC".

Please correct the company name and make it "In the Hands of God, LLC".

**OR**

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

Dated: December 15, 2008

  
Signature of a member or authorized representative of a member

Lusant Ordoñez

Typed or printed name of signee

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

FILED  
08 DEC 16 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

L08000113792  
FILED 8:00 AM  
December 12, 2008  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:  
IN THE HANDS OF GOD, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
600 SOUTH NORTHLAKE BOULEVARD  
SUITE 200  
ALTAMONTE SPRINGS, FL. 32701

The mailing address of the Limited Liability Company is:  
600 SOUTH NORTHLAKE BOULEVARD  
SUITE 200  
ALTAMONTE SPRINGS, FL. 32701

**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:  
ZENODRO HOMES AT THE RETREAT, INC.  
600 SOUTH NORTHLAKE BOULEVARD  
SUITE 200  
ALTAMONTE SPRINGS, FL. 32701

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: LUSANT ORDONEZ

FILED  
08 DEC 16 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ZENODRO HOMES AT THE RETREAT, INC.  
600 SOUTH NORTHLAKE BOULEVARD, SUITE 200  
ALTAMONTE SPRINGS, FL. 32701 US

L08000113792  
FILED 8:00 AM  
December 12, 2008  
Sec. Of State  
mthomas

### **Article VI**

The effective date for this Limited Liability Company shall be:

12/12/2008

Signature of member or an authorized representative of a member

Signature: LUSANT ORDONEZ

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08 DEC 16 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA