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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JAN 30 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 872390 7689086

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : January 27, 2009

ORDER TIME : 6:04 PM

ORDER NO. : 872390-001

CUSTOMER NO: 7689086

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: BOTTOMLINE PROS LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS: _____

**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:
BOTTOMLINE PROS 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:

NAME IS NOT SPELLED CORRECTLY - NAME SHOULD BE

BOTTOMLINE PROS LLC

OR

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

Dated: JANUARY 29, 2009

/S: Sherry Shive

Signature of a member or authorized representative of a member
Sherry Shive

Typed or printed name of signee

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

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TALLAHASSEE, FLORIDA

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

L09000009426
FILED 8:00 AM
January 29, 2009
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:

BOTTMLINE PROS LLC

Article II

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

8203 FOREGO RD
PALM BEACH GARDENS, FL. US 33418

The mailing address of the Limited Liability Company is:

8203 FOREGO RD
PALM BEACH GARDENS, FL. US 33418

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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL. 32301

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: DOREEN WALLACE

Article V

The name and address of managing members/managers are:

Title: MGRM
SHERRY L SHIVE
8203 FOREGO RD
PALM BEACH GARDENS, FL. 33418 US

Title: MGRM
BARBARA L GANGEMI
9165 PAULS RD
ALEXANDRIA, PA. 16611 US

Signature of member or an authorized representative of a member

Signature: SHERRY SHIVE

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FILED 8:00 AM
January 29, 2009
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