

209000019581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

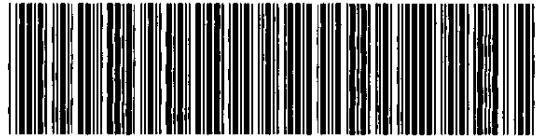
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TALLAHASSEE, FLORIDA

2009 MAR -9 PM 3:06

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Southernmost Tatoo, 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:

Adele V. Stones

(Name of Person)

Stones & Cardenas

(Firm/Company)

221 Simonton Street

(Address)

Key West, FL 33040

(City/State and Zip Code)

For further information concerning this matter, please call:

Adele V. Stones

(Name of Person)

at ( 305 ) 294-0252

(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)

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2009 MAR -9 PM 3:06  
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:  
Southernmost Tatoo, 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:

Article I: The name of the Limited Liability Company is:

Southernmost Tatoo, LLC

**OR**

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

Dated: March 4, 2009

  
Signature of a member or authorized representative of a member

Adele V. Stones, Attorney

Typed or printed name of signee

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

FILED  
2009 MAR -9 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

L09000019581  
FILED 8:00 AM  
February 26, 2009  
Sec. Of State  
gmcleod

**Article I**

The name of the Limited Liability Company is:  
SOUTHERNMOST TATOO, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
717 DUVAL STREET  
KEY WEST, FL. 33040

The mailing address of the Limited Liability Company is:  
717 DUVAL STREET  
KEY WEST, FL. 33040

**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:  
DARRELL SHAFRANSKI  
6185 69TH STREET  
VERO BEACH, FL. 32967

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: DARRELL SHAFRANSKI

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
DARRELL SHAFRANSKI  
6185 69TH STREET  
VERO BEACH, FL. 32967

Title: MGRM  
ALFRED MENCARELLI  
717 DUVAL STREET  
KEY WEST, FL. 33040

Signature of member or an authorized representative of a member

Signature: DARRELL SHAFRANSKI

L09000019581  
FILED 8:00 AM  
February 26, 2009  
Sec. Of State  
gmcleod