

LD9000024091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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

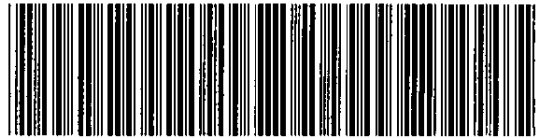
Special Instructions to Filing Officer:

**L. SELLERS**

APR - 6 2009

**EXAMINER**

Office Use Only



900142973389

03/16/09--01008--024 \*\*25.00

FILED

09 APR -3 AM 8:03

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 11th Avenue Delray 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:

RACHELE ARBERHAN  
(Name of Person)

11th Avenue Delray LLC  
(Firm/Company)

14762 WILDFLOWER LANE  
(Address)

DELRAY BEACH, FL 33446  
(City/State and Zip Code)

For further information concerning this matter, please call:

RACHELE at ( 561 ) 638-8865 or 954-816-5166  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 17, 2009

RACHELLE ABERMAN  
14762 WILDFLOWER LANE  
DELRAY BEACH, FL 33446

SUBJECT: 11TH AVENUE DELRAY, LLC  
Ref. Number: L09000024091

We have received your document for 11TH AVENUE DELRAY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 209A00008999

**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:  
11th Avenue Delray, LLC

**SECOND:**      The articles of organization or the application to transact business

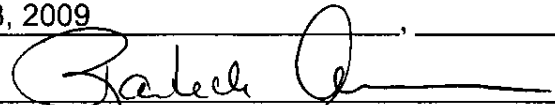
**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
Article V- Managers - delete -Equity Trust Company Custodian FBO Rachelle Arberman IRA.

**OR**

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

Dated: March 13, 2009

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Rachelle Arberman

Typed or printed name of signee

Filing Fee:        \$25.00        CC        756  
Certified Copy:    \$30.00 (optional)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

09 APR -3 AM 8:03

FILED