| L09000029867                            |                                       |  |
|---|---------------------------------------|--|
| (Requestor's Name)<br>(Address)         | 900278507929                          |  |
| (Address)                               | 900270307929                          |  |
| (City/State/Zip/Phone #)                | 10/28/1S0100S006 **25.00              |  |
| (Business Entity Name)                  |                                       |  |
| (Document Number)                       | 2015 OCT 28 PH 2:<br>TALLAHASSET FLOO |  |
| Special Instructions to Filing Officer: |                                       |  |
|   |                                       |  |
|   |                                       |  |
| Office Use Only                         | OCT 29 2015<br>J. HARRIS              |  |

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## **COVER LETTER**

TO: Registration Section Division of Corporations



Dear Sir or Madam:

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The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:



## STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Taltahassee, Florida 32301

Enclosed is a check for the following amount:

\$25 Filing Fee

S30 Filing Fee & Certificate of Status

S55 Filing Fee & Certified Copy

S60 Filing Fee, Certificate of Status & Certified Copy

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

**Registration Section** 

P.O. Box 6327

CR2E062 (9/15)

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

| <u>FIRST</u>   | E: The name of the limited liability company is: <u>INVESTOR</u> <u>MANACEMENT</u>   |                     |  |  |
|--|--|---------------------|--|--|
|  | Services LLC )   |                     |  |  |
| <u>SECO</u>  | <b>ND:</b> The Florida Document number of the limited liability company is: $\frac{LO 90002986}{}$   |                     |  |  |
| <u>THIRI</u>   | a tiolog of ano a nin ation  |                     |  |  |
| (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT |  |                     |  |  |
| À  | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: |                     |  |  |
|  | Name misspelled INVESTER Management Serv   | ices                |  |  |
|  | Name misspelled Investor Management Serv<br>Changemanne tu Investor Management Servi   | ces, lu             |  |  |
|  |  |                     |  |  |
|  | <u>OR</u>  |                     |  |  |
|  | Was defectively signed. The manner in which the document was defectively signed and the appropriate correction as follows:                   | n are               |  |  |
|  |  | Criter Th           |  |  |
|  |  |                     |  |  |
|  | <u>OR</u>  | 5197 - 27<br>-<br>- |  |  |
|  | The electronic transmission of the record was defective.   |                     |  |  |
|  | Signature of Authorized Representative Date  |                     |  |  |
|  | ure of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sing the designation). | sign                |  |  |

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature Filing Fee: \$25.00

**Certified Copy:** 

\$25.00 \$30.00 (optional)