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AND ASSEE, FLORID:

J. BRYAN

APR 28 2009

EXAMINER

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT:		SOKU 1403 LLC	;	
	(Name o	f Limited Liability Co	mpany)	
Dear Sir or Madam:				
The enclosed Articles	s of Correction and fee(s) a	re submitted for filing.		
Please return all corre	espondence concerning this	matter to the following	g:	
BENIGNO R. O	GRANDA			09
	(Name of Person)		_	CART T
	(Firm/Company)	,	_	27 P ARY C
14431 S.W. 78TI	H STREET			OG APR 27 PM 3: 44 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	(Address)		_	RIFA
MIAMI, FLORIDA			_	
For further information	(City/State and Zip Code) on concerning this matter,	nlease call:		
1 of further information	on concorning this matter, p			
BENIGNO R. GRA		at (at (322-8010 & Daytime Telephone Number)	
(Na	ime of Person)	(Area Code a	& Daytime Telephone Number)	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle		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)

, 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:
SOKU 1403 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: THE SPELLING OF THE MEMBERS LAST NAME IS INCORRECT.

ATTACHED IS HOW THE ARTICLE SHOULD READ.

	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
Dated:					

Signature of a member or authorized representative of a member

MAXIMILIANO SEGUNDO PAVLOVSKY, MGRM

Typed or printed name of signee

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)

Article V

The name and address of managing members/managers are:

Title: MGRM
MAXIMILIANO SEGUNDO PAVLOVSKY
2275 BISCAYNE BLVD #1
MIAMI, FLORIDA 33137

Title: MGR SOFIA PAVLOVSKY 2275 BISCAYNE BLVD #1 MIAMI, FLORIDA 33137



Electronic Articles of Organization For Florida Limited Liability Company

L09000036453 FILED 8:00 AM April 15, 2009 Sec. Of State gmcleod

Article I

The name of the Limited Liability Company is: SOKU 1403 LLC

Article II

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

2275 BISCAYNE BLVD SUITE 1 MIAMI, FL. 33137

The mailing address of the Limited Liability Company is:

2275 BISCAYNE BLVD SUITE 1 MIAMI, FL. 33137

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:

LINETTE M GUERRA 2275 BISCAYNE BLVD SUITE 1 MIAMI, FL. 33137

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: LINETTE M. GUERRA



Article V

The name and address of managing members/managers are:

Title: MGRM MAXIMILIANO S PAVLOVSKI 2275 BISCAYNE BLVD #1 MIAMI, FL. 33137

Title: MGR SOFIA PAVLOVSKI 2275 BISCAYNE BLVD #1 MIAMI, FL. 33137

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Article VI

The effective date for this Limited Liability Company shall be: 04/10/2009

Signature of member or an authorized representative of a member Signature: LINETTE M. GUERRA

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SECRETARY OF STATE
AFFAHASSEE. FLORIDA