

# L09000048663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

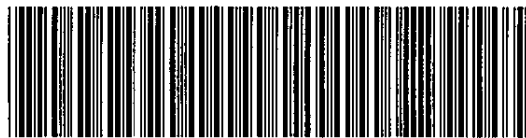
(Business Entity Name)

(Document Number)

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FILED  
2009 JUN 18 PM 1:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
JUN 19 2009  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ABBE CONSULTING GROUP, 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:

LAURA L. TAYLOR

Name of Person

ABBE CONSULTING GROUP, LLC

Firm/Company

10100 GROVE DRIVE

Address

PORT RICHEY, FL 34668

City/State and Zip Code

ltaylorbrb@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA L. TAYLOR

Name of Person

at ( 727 )

919-1253

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

**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:  
ABBE CONSULTING GROUP, 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:

THE MANAGING MEMBER WAS FILED INCORRECTLY. THE MANAGING  
MEMBER SHOULD BE CHANGED TO LAURA L. TAYLOR

**OR**



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

Dated: JUNE 15, 2009

Laura L. Taylor

Signature of a member or authorized representative of a member

LAURA L. TAYLOR

Typed or printed name of signee

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

2009 JUN 18 PM 1:08  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

L09000048663  
FILED 8:00 AM  
May 19, 2009  
Sec. Of State  
dbruce

**Article I**

The name of the Limited Liability Company is:  
ABBE CONSULTING GROUP, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
10100 GROVE DRIVE  
PORT RICHEY, FL. 34668

The mailing address of the Limited Liability Company is:  
10100 GROVE DRIVE  
PORT RICHEY, FL. 34668

**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:  
LAURA L TAYLOR  
10100 GROVE DRIVE  
PORT RICHEY, FL. 34668

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: LAURA L. TAYLOR

### **Article V**

The name and address of managing members/managers are:

Title: MGR  
CHARLES D BERTINE  
10100 GROVE DRIVE  
PORT RICHEY, FL. 34667 US

L09000048663  
FILED 8:00 AM  
May 19, 2009  
Sec. Of State  
dbruce

Signature of member or an authorized representative of a member

Signature: CHARLES D. BERTINE