

LD90000606A1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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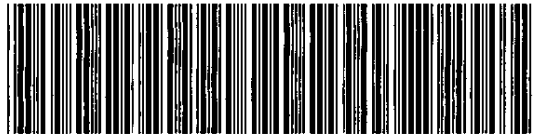
Special Instructions to Filing Officer:

L. SELLERS

JUL 21 2009

EXAMINER

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07/20/09--01067--014 **60.00

FILED

09 JUL 20 PM 4:24

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACW Consulting Services, 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:

Alice Charles-Wilson

Name of Person

ACW Consulting Services, LLC

Firm/Company

PO BOX 6101

Address

Tallahassee, FL 32314

City/State and Zip Code

autarky9@msn.com

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

For further information concerning this matter, please call:

Alice Charles-Wilson

Name of Person

at (850)

443-0362
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:
ACW Consulting Services, LLC

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

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



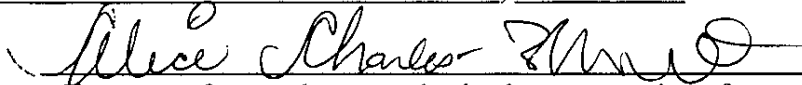
Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Purpose of LLC
Article III: "assessment, design, development, training consulting" inadvertently left
out critical services provided by the LLC. The corrected statement are as follows:
assessment, design, development, training and technical services consulting.

OR



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

Dated: June 17, 2009



Signature of a member or authorized representative of a member

Alice Charles-Wilson

Typed or printed name of signee

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

09 JUL 20 PM 4:24
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

L09000060691
FILED 8:00 AM
June 23, 2009
Sec. Of State
gmcleod

Article I

The name of the Limited Liability Company is:

ACW CONSULTING SERVICES, LLC

Article II

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

2956 WOODRICH DRIVE
APARTMENT C
TALLAHASSEE, FL. US 32301

The mailing address of the Limited Liability Company is:

P.O. BOX 6101
TALLAHASSEE, FL. US 32314

Article III

The purpose for which this Limited Liability Company is organized is:

ASSESSMENT,DESIGN,DEVELOPMENT,TRAINING CONSULTING

Article IV

The name and Florida street address of the registered agent is:

ALICE CHARLES-WILSON
2956 WOODRICH DRIVE
APARTMENT C
TALLAHASSEE, FL. 32301

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: ALICE CHARLES-WILSON

Article V

The name and address of managing members/managers are:

Title: MGRM
ALICE CHARLES-WILSON
P.O. BOX 6101
TALLAHASSEE, FL. 32314 US

L09000060691
FILED 8:00 AM
June 23, 2009
Sec. Of State
gmcleod

Article VI

The effective date for this Limited Liability Company shall be:

06/23/2009

Signature of member or an authorized representative of a member

Signature: ALICE CHARLES-WILSON