

LD9000079271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

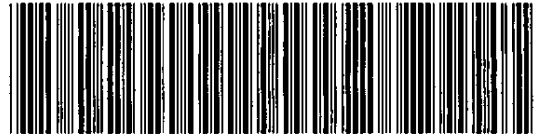
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09 AUG 24 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Carlson AUG 25 2009

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CONSULTING TEAM, 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:

MARIA SLOBODA  
Name of Person

CONSULTING TEAM, LLC  
Firm/Company

6610 CHESTNUT CIR  
Address

NAPLES, FL 34109  
City/State and Zip Code

MSLOBODA@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARGARET SLOBODA at ( 239 ) 596-0460  
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

**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:

CONSULTING TEAM, 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

☒

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

PLEASE CORRECT THE NAME

FROM CONSULTING TEAM, LLC

TO: CONSULTING TEAM, LLC

Dated: \_\_\_\_\_

AUGUST 18<sup>th</sup>, 2009

Maria Sloboda

Signature of a member or authorized representative of a member

MARIA SLOBODA

Typed or printed name of signee

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

09 AUG 24 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

L09000079271  
FILED 8:00 AM  
August 18, 2009  
Sec. Of State  
gmcleod

**Article I**

The name of the Limited Liability Company is:

COSULTING TEAM, LLC

**Article II**

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

6610 CHESTNUT CIR  
NAPLES, FL. 34109

The mailing address of the Limited Liability Company is:

6610 CHESTNUT CIR  
NAPLES, FL. 34109

**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:

MARIA SLOBODA  
6610 CHESTNUT CIR  
NAPLES, FL. 34109

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: MARIA SLOBODA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
MARIA SLOBODA  
6610 CHESTNUT CIR  
NAPLES, FL. 34109

**L09000079271**  
**FILED 8:00 AM**  
**August 18, 2009**  
**Sec. Of State**  
gmcleod

### **Article VI**

The effective date for this Limited Liability Company shall be:

08/18/2009

Signature of member or an authorized representative of a member

Signature: MARIA SLOBODA