

L09000086147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

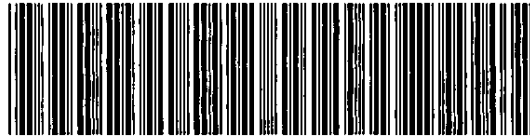
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 SEP 23 AM 11:22

T. HAMPTON

SEP 24 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLAMINGO DR 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:

DEBORAH GAMBINA

Name of Person

Firm/Company

357 B HERITAGE HILLS

Address

SOMERS NY 10589

City/State and Zip Code

MERCURY SWIFT @ COMCAST.NET

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

For further information concerning this matter, please call:

DEBORAH GAMBINA at ( 914 ) 277-0888

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:  
FLAMINGO DR 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:

CHANGE TITLE FOR DEBORAH GAMBINA TO: MGR

DELETE VALLI GAMBINA

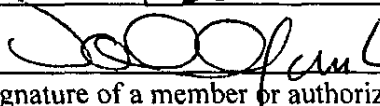
WE FILLED IT OUT INCORRECTLY WHEN FILING

**OR**



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

Dated: SEPT 17, 2009

  
Signature of a member or authorized representative of a member

VALLI GAMBINA

Typed or printed name of signee

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

09 SEP 23 AM 11:22

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DIVISION OF CORPORATIONS

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

L09000086147  
FILED 8:00 AM  
September 08, 2009  
Sec. Of State  
ncausseauX

**Article I**

The name of the Limited Liability Company is:  
FLAMINGO DR LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
357B HERITAGE HILLS  
SOMERS, NY. US 10589

The mailing address of the Limited Liability Company is:  
357B HERITAGE HILLS  
SOMERS, NY. US 10589

**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:  
SANDRA PRIDEMORE CPA  
229 TAMiami TRAIL S #1  
VENICE, FL. 34285

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: SANDRA PRIDEMORE, CPA

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DIVISION OF CORPORATIONS

### Article V

The name and address of managing members/managers are:

Title: MGRM  
DEBORAH GAMBINA  
357B HERTITAGE HILLS  
SOMERS, NY. 10589 US

Title: MGR  
VALLI GAMBINA  
409 BAILEY RD  
VENICE, FL. 34292 US

Signature of member or an authorized representative of a member

Signature: DEBORAH GAMBINA

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FILED 8:00 AM  
September 08, 2009  
Sec. Of State  
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