

L09000089992

(H09000219130 3)

Florida Department of State
Division of Corporations
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((H09000219130 3)))



H090002191303ABCZ

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : MCDONALD HOPKINS CO., PA
Account Number : I20050000183
Phone : (561)472-7510
Fax Number : (561)472-2975

2009 OCT 13 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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09 OCT 13 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

EQUITY PROTECTION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

A. LUNT
OCT 14 2009
EXAMINER

(H09000219130 3)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Equity Protection, 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:

Name of Person

McDonald Hopkins, LLC

Firm/Company

505 S. Flagler Drive, #300

Address

West Palm Beach, Florida 33401

City/State and Zip Code

jpaul@mcdonaldhopkins.com

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

For further information concerning this matter, please call:

Jaimie Paul

Name of Person

21 (561)

472-2121

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

CR2E062 (08/35)

(H09000219130 3)

(H09000219130 3)

**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:
Equity Protection, 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:

Carole Elliott is deleted as manager. Stephen Elliott's title is hereby changed
to manager.

OR



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

Dated: October 12 2009


Signature of a member or authorized representative of a member

John T. Metzger, Esq.

Typed or printed name of signee

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

CR2E062 (08/05)

(H09000219130 3)

2009 OCT 13 AM 10:03
STATE OF FLORIDA
TALLAHASSEE

FILED

(H09000219130 3)

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

L09000089992
FILED 8:00 AM
September 17, 2009
Sec. Of State
ncausseaux

Article I

The name of the Limited Liability Company is:
EQUITY PROTECTION, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
505 S. FLAGLER DRIVE
SUITE 300
WEST PALM BEACH, FL. US 33401

The mailing address of the Limited Liability Company is:
505 S. FLAGLER DRIVE
SUITE 300
WEST PALM BEACH, FL. US 33401

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:
JOHN T METZGER ESQ.
505 S. FLAGLER DRIVE
300
WEST PALM BEACH, FL. 33401

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: JOHN T. METZGER

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Article V

The name and address of managing members/managers are:

Title: MGMR
STEPHEN ELLIOTT
505 S. FLAGLER DRIVE, SUITE 300
WEST PALM BEACH, FL. 33401 US

Title: MGR
CAROLE ELLIOTT
505 S. FLAGLER DRIVE, SUITE 300
WEST PALM BEACH, FL. 33401 US

Article VI

The effective date for this Limited Liability Company shall be:

09/17/2009

Signature of member or an authorized representative of a member

Signature: STEPHEN ELLIOTT

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FILED 8:00 AM
September 17, 2009
Sec. Of State
ncausseaux

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