

LD9000117729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

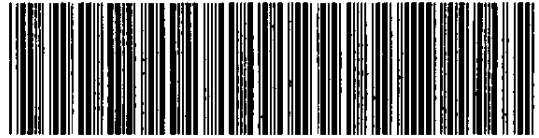
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N. G. G. DEC 22 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TWENYFOUR APPS, 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:

Bibi Ruiz

Name of Person

Bryn & Associates, P.A.

Firm/Company

2 South Biscayne Blvd, Suite 2680

Address

Miami, Florida 33131

City/State and Zip Code

bibi@markbryn.com

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

For further information concerning this matter, please call:

Bibi Ruiz

Name of Person

at (305)

374-0501
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 (08/05)

**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:
 TWENYFOUR APPS, LLC

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

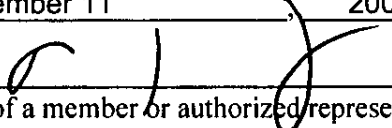
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

☐ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The name of the Corporation is misspelled. The name of the Corporation is:
TWENTYFOUR APPS, LLC.

OR

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

Dated: December 11 2009



Signature of a member or authorized representative of a member

Mark J. Bryn

Typed or printed name of signee

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

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

L09000117729
FILED 8:00 AM
December 10, 2009
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
TWENYFOUR APPS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
19967 WATERS END DR.
BOCA RATON, FL. 33434

The mailing address of the Limited Liability Company is:
19967 WATERS END DR.
BOCA RATON, FL. 33434

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:
A1A REGISTERED AGENT, INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL. 33411

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: TINA MAKI

Article V

The name and address of managing members/managers are:

Title: MGRM
MARC EIDELKIND
19667 WATERS END DRIVE
BOCA RATON, FL. 33434 FL

Signature of member or an authorized representative of a member

Signature: MARC EIDELKIND

L09000117729
FILED 8:00 AM
December 10, 2009
Sec. Of State
nculligan