

L1000006764

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(Address)

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EXAMINER

2010 FEB 11 - PM 3:21  
SECRETARY OF STATE  
CLERK OF COURT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2010

CHARON OHNONA  
901 SOUTH ATLANTIC AVE., UNIT 108  
ORMOND BEACH, FL 32176

SUBJECT: TATOO CORNER LLC  
Ref. Number: L10000006764

We have received your document for TATOO CORNER LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 310A0000251

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 FEB 11 PM 3:21

FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tattoo corner 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:

Charon Ohnwa  
Name of Person

Tattoo Corner LLC  
Firm/Company

901 South Atlantic Ave Unit 108  
Address

Ormond Beach, FL 32174  
City/State and Zip Code

rwrightcpa@hotmail.com  
E-mail address: (do be used for future annual report notification)

For further information concerning this matter, please call:

Randy Wright at ( 386 ) 322-8754  
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

2010 FEB 11 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

**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:

Tattoo Corner 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:

Article I - Tattoo Corner LLC - incorrect due

to misspelling - should be

Tattoo Corner LLC

**OR**



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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Randy Wright, CPA  
Signature of a member or authorized representative of a member

Randy Wright  
Typed or printed name of signee

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

2010 FEB 11 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

L10000006764  
FILED 8:00 AM  
January 19, 2010  
Sec. Of State  
Isellers

**Article I**

The name of the Limited Liability Company is:  
TATOO CORNER LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
7 SOUTH ATLANTIC AVE  
8A  
COCOA BEACH, FL. 32931

The mailing address of the Limited Liability Company is:  
901 SOUTH ATLANTIC AVE  
UNIT 108  
ORMOND BEACH, FL. 32176

**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:  
CHARON OHNONA  
901 SOUTH ATLANTIC AVE  
UNIT 108  
ORMOND BEACH, FL. 32176

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: CHARON OHNONA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
CHARON OHNONA  
901 SOUTH ATLANTIC AVE, UNIT 108  
ORMOND BEACH, FL. 32931

L10000006764  
FILED 8:00 AM  
January 19, 2010  
Sec. Of State  
Isellers

### **Article VI**

The effective date for this Limited Liability Company shall be:

01/19/2010

Signature of member or an authorized representative of a member

Signature: RANDY WRIGHT