

L10000044610

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(Address)

(City/State/Zip/Phone #)

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10 MAY 19 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 20 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 49th Street North Enterprises 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:

Ann M. M. Taillon
Name of Person

49th Street North Enterprises LLC
Firm/Company

12255 4th Street East
Address

Treasure Island, Florida 33706 USA
City/State and Zip Code

sbausada@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samuel M. Bousada at (727) 385-0104
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

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TALLAHASSEE, FLORIDA

**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:
4th Street North Enterprises, 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 our limited liability company is
49th Street North Enterprises, LLC
and not
4th Street North Enterprises, LLC
(missing the digit 9)
OR



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

Dated: May 14th 2010

Ann Taillon
Signature of a member or authorized representative of a member

Ann Taillon
Typed or printed name of signee

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

10 MAY 19 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

L10000044610
FILED 8:00 AM
April 26, 2010
Sec. Of State
Isellers

Article I

The name of the Limited Liability Company is:
4TH STREET NORTH ENTERPRISES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
12255 4TH STREET EAST
TREASURE ISLAND, FL. 33706

The mailing address of the Limited Liability Company is:
12255 4TH STREET EAST
TREASURE ISLAND, FL. 33706

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:
ANN TAILLON
12255 4TH STREET EAST
TREASURE ISLAND, FL. 33706

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: ANN TAILLON

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10 MAY 19 PM 1:37
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TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: P
PHILIPPE SAIKALEY
12255 4TH STREET EAST
TREASURE ISLAND, FL. 33706 US

Title: VP
ANN TAILLON
12255 4TH STREET EAST
TREASURE ISLAND, FL. 33706 US

Signature of member or an authorized representative of a member

Signature: SAM BOUSADA

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TALLAHASSEE, FLORIDA