

L10000048598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

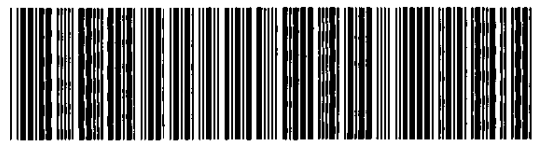
(Business Entity Name)

(Document Number)

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FILED
10 JUN -3 PM 12: 25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

S. HAWKES

JUN 04 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1354 N. Laura, 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:

Claude R. Moulton

Name of Person

Moulton Bosshardt, LLC

Firm/Company

1354 N. Laura Street

Address

Jacksonville, FL 32206

City/State and Zip Code

claude@mblawoffices.com

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

For further information concerning this matter, please call:

Claude R. Moulton

Name of Person

at (904) 632-0120

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:
1354 N. Laura, LLC

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

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

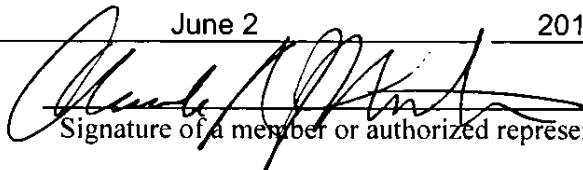
Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The last name of one the managing members, JoAnn Tredenick, was misspelled.

The correct spelling is JoAnn Tredennick.

OR

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

Dated: June 2 2010


Signature of a member or authorized representative of a member

Claude R. Moulton

Typed or printed name of signee

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

FILED
10 JUN -3 PM 12:25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

L10000048598
FILED 8:00 AM
May 05, 2010
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:
1354 N. LAURA, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1354 N. LAURA STREET
JACKSONVILLE, FL. 32206

The mailing address of the Limited Liability Company is:
1354 N. LAURA STREET
JACKSONVILLE, FL. 32206

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:
JACK MEEKS
1354 N. LAURA STREET
JACKSONVILLE, FL. 32206

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: JACK MEEKS

FILED
10 JUN -3 PM 12:25
CLERK OF STATE
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

- Title: MGRM
JACK MEEKS
1354 N. LAURA STREET
JACKSONVILLE, FL. 32206

Title: MGRM
JOANNE TREDENICK
1354 N. LAURA STREET
JACKSONVILLE, FL. 32206

Signature of member or an authorized representative of a member

Signature: CLAUDE R. MOULTON

L10000048598
FILED 8:00 AM
May 05, 2010
Sec. Of State
dbruce

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10 JUN -3 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA