

L10000076230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

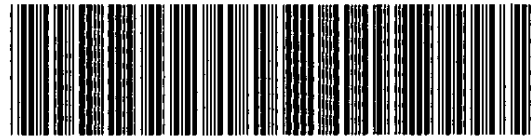
(Business Entity Name)

(Document Number)

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2010 JUL 27 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

C. LEWIS

JUL 28 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Artificially Perfect 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:

Kimberly L Reeder
Name of Person

Artificially Perfect
Firm/Company

16221 SW 2825K
Address

Homestead FL 33033
City/State and Zip Code

Kimmie-Lee Datt.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Reeder at (786) 295 9314
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

**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:

Artificially Perfect

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:

wrong Spelling of
company name. Should
be as above

OR

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

Dated: _____

July 23, 2010
Kathy Reeder

Signature of a member or authorized representative of a member

Typed or printed name of signee

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

FILED
2010 JUL 27 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

L10000076230
FILED 8:00 AM
July 20, 2010
Sec. Of State
thampton

Article I

The name of the Limited Liability Company is:

ARTIFICALLY PERFECT LLC

Wrong
Spelling

Article II

The street address of the principal office of the Limited Liability Company is:

16221 SW 282 ST
HOMESTEAD, FL. US 33033

The mailing address of the Limited Liability Company is:

16221 SW 282 ST
HOMESTEAD, FL. US 33033

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:

KIMBERLY L REEDER
16221 SW 282 ST
HOMESTEAD, FL. 33033

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: KIMBERLY REEDER

Article V

The name and address of managing members/managers are:

Title: MGR
· KIMBERLY L REEDER
16221 SW 282 ST
HOMESTEAD, FL. 33033

Signature of member or an authorized representative of a member

Signature: KIMBERLY REEDER

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FILED 8:00 AM
July 20, 2010
Sec. Of State
thampton