

L10000080662

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG -3 AM 10:52

T. HAMPTON
AUG -4 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HI-TORGUE PRODUCTS, 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:

SILVIO ZUCCARELLI

Name of Person

LOUIS MAMO & COMPANY

Firm/Company

351 S. CYPRESS ROAD, SUITE #110

Address

POMPANO BEACH, FL 33060

City/State and Zip Code

silvio@lmc123.com

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

For further information concerning this matter, please call:

SILVIO ZUCCARELLI

Name of Person

at (954)

942-1120

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:
HI-TORQUE PRODUCTS, 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 COMPANY NAME WAS MISPELLED. THE CORRECT COMPANY

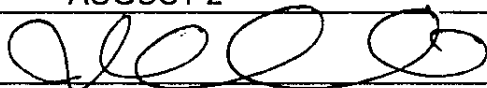
NAME NEEDS TO BE "HI-TORQUE PRODUCTS, LLC."

OR



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

Dated: AUGUST 2 2010



Signature of a member or authorized representative of a member

Vincent Armeli

Typed or printed name of signee

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

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

L10000080662
FILED 8:00 AM
August 02, 2010
Sec. Of State
thampton

Article I

The name of the Limited Liability Company is:
HI-TORGUE PRODUCTS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
2129 N.W. 22ND STREET
POMPAN0 BEACH, FL. 33069

The mailing address of the Limited Liability Company is:
2129 N.W. 22ND STREET
POMPAN0 BEACH, FL. 33069

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:
VINCENT ARMELI
2129 N.W. 22ND STREET
POMPAN0 BEACH, FL. 33069

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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: VINCENT ARMELI

Article V

The name and address of managing members/managers are:

Title: MGRM
VINCENT ARMELI
2129 N.W. 22ND STREET
POMPANO BEACH, FL. 33069

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thampton

Signature of member or an authorized representative of a member

Signature: VINCENT ARMELI

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