# L10000102981

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EXAMINER

HYTSION OF CORPORATIONS

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# **COVER LETTER**

TO: Registration Division o	n Section f Corporations	2
SUBJECT:	Perigree Employer Solu	itions, LLC.
	Name of Limited Liability Co	mpany
Dear Sir or Madam	:	
The enclosed Articl	es of Correction and fee(s) are submitted for filing.	
Please return all con	respondence concerning this matter to the followin	g:
	John S. Riordan, Esq.	
	Name of Person	_
R	IORDAN & HERMAN, PL. Firm/Company	_
	TimeCompany	
3600 S	outh Congress Avenue, Suite G	_
E	Boynton Beach, FL 33426 City/State and Zip Code	_
	jriordan@rhlawfl.com	
E-mail addres	s: (to be used for future annual report notification)	_
For further informa	tion concerning this matter, please call:	
	S. Riordan, Esq. at ( 561	_)738-7922
N	ame of Person Area Co	ode & Daytime Telephone Number
STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Certallahassee, Florida	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a checl	k for the following amount:	•
\$25 Filing Fee	\$30 Filing Fee & \$55 Filing Fee & Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy
CR2E062 (08/05)		

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: Perigree Employer Solutions, LLC.		
SECO:	ND: The articles of organization or the application to transact business		
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT		
<b>√</b>	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  The name was typed incorrectly. The proper name of the company is:		
	Perigee Employer Solutions, LLC.		
	<u>OR</u>		
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:		
	•		
	,		
Dated:	October 14		
	Signature of a member or authorized representative of a member		
	John S. Riordan, Esq.		
	Typed or printed name of signee		
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)		

## Electronic Articles of Organization For Florida Limited Liability Company

L10000102981 FILED 8:00 AM October 01, 2010 Sec. Of State gharvey

#### Article I

The name of the Limited Liability Company is: PERIGREE EMPLOYER SOLUTIONS, LLC.

#### Article II

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

5392 COURTNEY CIRCLE BOYNTON BEACH, FL. 33472

The mailing address of the Limited Liability Company is:

5392 COURTNEY CIRCLE BOYNTON BEACH, FL. 33472

#### 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:

RIORDAN & HERMAN, PL. 3600 SOUTH CONGRESS AVENUE SUITE G BOYNTON BEACH, FL. 33426

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: JOHN S. RIORDAN, ESQ.

### Article V

The name and address of managing members/managers are:

Title: MGRM SARAH STALEY 5392 COURTNEY CIRCLE BOYNTON BEACG, FL. 33472

Signature of member or an authorized representative of a member Signature: JOHN S. RIORDAN, ESQ.

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