

L10000/15092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

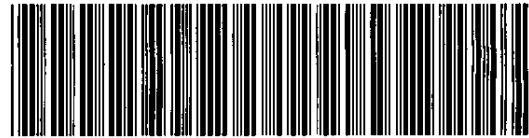
(Business Entity Name)

(Document Number)

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J. BRYAN

NOV 24 2010
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2010

CHARLES D JOHNSON
SELLAR SEWELL RUSS SAYLOR & JOHNSON P.A.
907 WEBSTER ST
LEESBURG, FL 34748

SUBJECT: S&S PARTNERSHIP LLC
Ref. Number: L10000115092

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TALLAHASSEE, FLORIDA

We have received your document for S&S PARTNERSHIP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 610A00026467

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S&S PARTNERSHIP 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:

CHARLES D JOHNSON

Name of Contact Person

SELLAR SEWELL RUSS SAYLOR & JOHNSON P.A.

Firm/Company

907 WEBSTER ST LEESBURG FL

Address

LEESBURG, FL 34748

City/State and Zip Code

CHUCKJ@907WEBSTER.COM

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

For further information concerning this matter, please call:

CHUCK JOHNSON

Name of Contact Person

at (352) 787-2308

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

CR2E062 (08/05)

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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: S & S Partnership LLC Ref # L10000115092

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:

Name of LLC should be S & E Partnership LLC

OR



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

Dated: 11-19-10

Susan K Sapp
Signature of a member or authorized representative of a member

Susan K Sapp
Typed or printed name of signer

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

FILED
NOV 23 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

L10000115092
FILED 8:00 AM
November 04, 2010
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:
S&S PARTNERSHIP LLC

Article II

The street address of the principal office of the Limited Liability Company is:
35841 TIMBERTOP LANE
FRUITLAND PARK, FL. 34731

The mailing address of the Limited Liability Company is:
35841 TIMBERTOP LANE
FRUITLAND PARK, FL. 34731

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:
CHARLES D JOHNSON
907 WEBSTER ST
LEESBURG, FL. 34748

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: CHARLES D JOHNSON

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: MGRM
SUSAN SAPP
35841 TIMBERTOP LANE
FRUITLAND PARK, FL. 34731

Title: MGRM
EMMETT SAPP
35841 TIMBERTOP LANE
FRUITLAND PARK, FL. 34731

Article VI

The effective date for this Limited Liability Company shall be:

11/04/2010

Signature of member or an authorized representative of a member

Signature: CHUCK JOHNSON

L10000115092
FILED 8:00 AM
November 04, 2010
Sec. Of State
jbryan

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10 NOV 23 AM 8:20
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TALLAHASSEE, FLORIDA