

Division of Corporations

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L10000115180

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICE
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DIAMOND IN THE RUFF STAGING & REDESIGN LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

RECEIVED
10 NOV -9 AM 10:30
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TALLAHASSEE, FLORIDA

2010 NOV -9 AM 10:24
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Corporate Filing Menu

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November 9, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DIAMOND IN THE RUFF STAGING & REDESIGN LLC
1132 GRANADA STREET
FT PIERCE, FL 34949

SUBJECT: DIAMOND IN THE RUFF STAGING & REDESIGN LLC
REF: L10000115180

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H10000242944
Letter Number: 210A00026292

Attn: Carolyn

(F) 850-245-6030

FILED

ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

2010 NOV -8 AM 10:24

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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the limited liability company is:
DIAMOND IN THE RUFF STAGING & REDESIGN 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:

Incorrect name used on Article One

ARTICLE I - Name: The name of the Limited Liability Company is:

Diamond in the Rough Staging & Redesign LLC

OR



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

Dated: November 8, 2010

Sharon Scalone

Signature of a member or authorized representative of a member

SHARON SCALONE, MANAGER

Typed or printed name of signee

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

DIAMOND IN THE RUFF STAGING & REDESIGN LLC

ARTICLE II - Address:

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

Principal Office Address:

1132 GRANADA STREET
FORT PIERCE, FL 34949

Mailing Address:

1132 GRANADA STREET
FORT PIERCE, FL 34949

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

SHARON SCALONE

Name

1132 GRANADA STREET

Florida street address (P.O. Box NOT acceptable)

FORT PIERCE FL 34949

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S..

Sharon Scalone
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

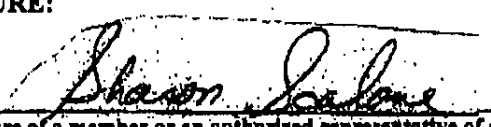
Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRSHARON SCALONE1132 GRANADA STREETFORT PIERCE, FL 34949MGRRAYMOND SCALONE1132 GRANADA STREETFORT PIERCE, FL 34949

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SHARON SCALONE

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)