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J. SAULSBERRY  
EXAMINER

NOV 18 2010

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KMT Media Group 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:

Neil P. Cha-Fong

Name of Person

Kingston-Miami Trading Co.

Firm/Company

1465 NW 21st Terrace

Address

Miami, FL 33142

City/State and Zip Code

neil@kingstonmiami.com

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

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For further information concerning this matter, please call:

Neil P. Cha-Fong

Name of Person

at ( 305 )

324-9497

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

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.

**(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 4 Managing Members (CHA FONG, NEIL, CHA FONG, CHRISTINE,**

CHA FONG, PATRICK, AND CHA FONG, PRISCILLA) are incorrect. The parent

company "P.A. CHA-FONG AND ASSOCIATES, INC" is the only managing

member of KMT Media Group LLC.

**OR**



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

Dated: November 10, 2010

Signature of a member or authorized representative of a member

**Neil P. Cha-Fong**

Typed or printed name of signee

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

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