

L10000128066

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 23 PM 12:48

DEC 27 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PMA Project Managers 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:

Edward Monahan
Name of Person

Monahan Mijares CPA PA
Firm/Company

2519 Galiano Street, Ste. 703
Address

Coral Gables FL 33134
City/State and Zip Code

edward.monahan@mma.com.ve
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Monahan at (305) 407-1438
Name of Person 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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 DEC 23 PM 12:43

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:
PMA Project Managers, 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 Manager name was incorrectly filed as Octavio Ulisse. The correct name
should be Jose Ottavio Ulisse.

OR

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

Dated: December 16, 2010



Signature of a member or authorized representative of a member

Jose Ottavio Ulisse

Typed or printed name of signee

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

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

L10000128066
FILED 8:00 AM
December 15, 2010
Sec. Of State
ncausseau

Article I

The name of the Limited Liability Company is:

PMA PROJECT MANAGERS, LLC

Article II

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

2519 GALIANO STREET
STE. 703
CORAL GABLES, FL. 33134

The mailing address of the Limited Liability Company is:

2519 GALIANO STREET
STE. 703
CORAL GABLES, FL. 33134

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:

ROARK R MONAHAN CPA
2519 GALIANO STREET
STE 703
CORAL GABLES, FL. 33134

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: ROARK R. MONAHAN

Article V

The name and address of managing members/managers are:

Title: MGR
ALFREDO CALZADILLA
9511 SAVONA WINDS DRIVE
DELRAY BEACH, FL. 33446 US

Title: MGR
OCTTAVIO ULISSE
3332 NE 190 STREET
AVENTURA, FL. 33180 US

Signature of member or an authorized representative of a member

Signature: OCTTAVIO ULISSE

L10000128066
FILED 8:00 AM
December 15, 2010
Sec. Of State
ncausseaux