

L110000008706

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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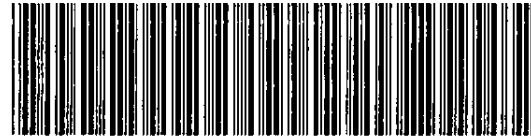
(Business Entity Name)

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FEB - 9 2011

EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB - 7 PM 12: 27

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SOCARRAS DRYWALL SERVICES LLC  
Name of Limited Liability Company

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
11 FEB - 7 PM 12:27

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:

DIOSDELTO NAPOLES SOCARRAS  
Name of Person

Firm/Company

20715 NW 41st AVENUE RD  
Address

MIAMI GARDENS FL 33055  
City/State and Zip Code

DIOSDELTON@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIOSDELTO NAPOLES SOCARRAS at ( 305 ) 834-3981  
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**

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.

FILED STATE  
SECRETARY OF CORPORATIONS  
FEB -7 PM 12:27

**FIRST:** The name of the limited liability company is:  
SOCARRAS DRYWALL SERVICES 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:  
NAME CORRECTION FOR REGISTERED AGENT AND MANAGER MEMBER

AS FOLLOWS:

LAST NAME: NAPOLES SOCARRAS FIRST NAME: DIOSDELTO

CORRECTION WOULD SHOW: NAPOLES SOCARRAS, DIOSDELTO

**OR**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: February 4th 2011

Signature of a member or authorized representative of a member

DIOSDELTO NAPOLES SOCARRAS

Typed or printed name of signee

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

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

L11000008706  
FILED 8:00 AM  
January 21, 2011  
Sec. Of State  
gmcleod

**Article I**

The name of the Limited Liability Company is:  
SOCARRAS DRYWALL SERVICES LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
20715 NW 41ST AVENUE ROAD  
MIAMI GARDENS, FL. US 33055

The mailing address of the Limited Liability Company is:  
20715 NW 41ST AVENUE ROAD  
MIAMI GARDENS, FL. US 33055

**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:  
DIOSDELTO N SOCARRAS  
20715 NW 41ST AVENUE ROAD  
MIAMI GARDENS, FL. 33055

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: DIOSDELTO N SOCARRAS

## Article V

The name and address of managing members/managers are:

Title: MGRM  
DIOSDELTO N SOCARRAS  
20715 NW 41ST AVENUE ROAD  
MIAMI GARDENS, FL. 33055 US

L11000008706  
FILED 8:00 AM  
January 21, 2011  
Sec. Of State  
gmcleod

Signature of member or an authorized representative of a member

Electronic Signature: DIOSDELTO N SOCARRAS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.