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SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. KOHR

FEB - 9 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOCARRAS ROOFING 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:

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

CR2E062 (08/05)

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 FEB -7 PM 12:26

**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:
SOCARRAS ROOFING 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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**Electronic Articles of Organization
For
Florida Limited Liability Company**

L11000008711
FILED 8:00 AM
January 21, 2011
Sec. Of State
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Article I

The name of the Limited Liability Company is:

SOCARRAS ROOFING 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

L11000008711
FILED 8:00 AM
January 21, 2011
Sec. Of State
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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.