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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hoff Family Restaurant 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:

William N. Gambert, Attorney at Law
Name of Person

Firm/Company

428 N. Halifax Av.
Address

Daytona Beach, FL 32118
City/State and Zip Code

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

For further information concerning this matter, please call:

William N. Gambert
Name of Person

at (386) 257-9873
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)

**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:
Hoff Family Restaurant 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:

One of the managing general managers is listed as Brenda A. Hoof, this

is an incorrect spelling, the correct spelling of her name is Brenda A. Hoff

the Articles should be corrected accordingly

OR



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

Dated: March 9, 2011


Signature of a member or authorized representative of a member

Charles S. Hoff, Jr.

Typed or printed name of signee

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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