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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

MAR 3 0 2011

EXAMINER

COVER LETTER

Division	of Corporations			
SUBJECT:	SUBJECT: Braseal Group, LLC.			
Name of Limited Liability Company				
Dear Sir or Madam	1:			
The enclosed Artic	eles of Correction and fee(s) are submitted for filing	<u>,</u>		
Please return all co	prrespondence concerning this matter to the following	ng:		
	J. Michael Wermuth			
	Name of Person	_		
	Gonzalez & Wermuth, P.L.			
	Firm/Company			
8750 1	Northwest 36th Street, Suite 425	_		
	Address			
	Miami, Florida 33178 City/State and Zip Code	_		
E-mail addres	ruben@rgmwlaw.com ss: (to be used for future annual report notification)	_		
For further informa	tion concerning this matter, please call:			
Ru	ben M. Moreno at (305	715-7157		
N	ame of Person Area Co	ode & Daytime Telephone Number		
STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cerallahassee, Florida	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	k for the following amount:			
\$25 Filing Fee	\$30 Filing Fee & \$55 Filing Fee & Certificate of Status 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 <u>within the required</u> 30 business days to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is: Braseal Group, 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:

Incorrect Statement:

Article V

The name of the Managing Member(s) shall be:

MANAGING MEMBER

SERGIO FRANCISCO STUMPF GABRIEL STUMPF EVANDRO CARLOS STUMPF DAIANE BALZAN GAVA TICIANA LONGO

Reason:

The statement was incorrect because it identifies the managers as

members. This company is manager-managed.

Corrected Statement:

Article V

The Company is to be manager-managed. The names of the initial managers are:

MANAGERS

SERGIO FRANCISCO STUMPF GABRIEL STUMPF EVANDRO CARLOS STUMPF DAIANE BALZAN GAVA TICIANA LONGO SECRETARY OF STATE DIVISION OF CORPORATIONS

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

Dated: MARCH 23 , 2011

Signature of a member or authorized representative of a member

RUBEN M. MORENO, ESQ.

Typed or printed name of signee

DIVISION OF CORPORATIONS

H11000046043

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

BRASEAL GROUP, LLC

ARTICLE I

The name of the Limited Liability Company shall Be: BRASEAL GROUP, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company:

957 SW 149 CT MIAMI, FL 33194

The name and the Florida street address of the registered agent?

CESAR LONGO 957 SW 149 CT MIAMI, FL 33194

ARTICLE V

The name of the Managing Member(s) shall be:

MANAGING MEMBER
SERGIO FRANCISCO STUMPF
GABRIEL STUMPF
EVANDRO CARLOS STUMPF
DAIANE BALZAN GAVA
TICIANA LONGO

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

BRASEAL GROUP, LLC	
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Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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 Agant

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Ticiana Longo
Typed or printed name of signee

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SECRETARY OF STATE DIVISION OF CORPORATIONS