

L11000096684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

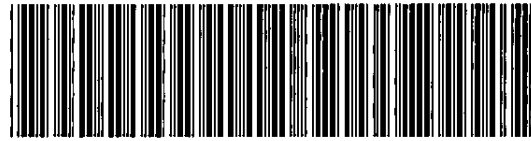
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MR. E. Q 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:

Timothy L Bryant  
Name of Person

\_\_\_\_\_  
Firm/Company

529 Bob Sikes Blvd apt B  
Address

Fort Walton Beach FL 32547  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy L Bryant at (850) 259-2165  
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.

**FIRST:** The name of the limited liability company is:

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**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:

Principle address:

Incorrect 526 Bob Sikes Blvd apt B Beach FL 32817 Fort Walton

Correct 529 Bob Sikes Blvd apt B Beach FL 32817 Fort Walton

**OR**

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

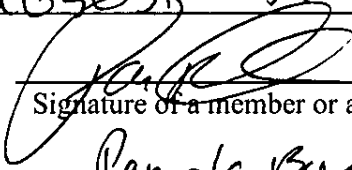
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Dated: August 31, 2011

  
Signature of a member or authorized representative of a member

Pamela Braden LP

Typed or printed name of signee

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 SEP -2 AM 11:50

FILED

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

L11000096684  
FILED 8:00 AM  
August 23, 2011  
Sec. Of State  
Isellers

**Article I**

The name of the Limited Liability Company is:  
MR. E Q LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
526 BOB SIKES BLVD APT B  
FORT WALTON BEACH, FL. 32547

The mailing address of the Limited Liability Company is:  
526 BOB SIKES BLVD APT B  
FORT WALTON BEACH, FL. 32547

**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:  
TIMOTHY L BRYANT  
526 BOB SIKES BLVD APT B  
FORT WALTON BEACH, FL. 32547

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: TIMOTHY LEE BRYANT

## Article V

The name and address of managing members/managers are:

Title: MGRM  
TIMOTHY L BRYANT  
526 BOB SIKES BLVD APT B  
FORT WALTON BEACH, FL. 32547

L11000096684  
FILED 8:00 AM  
August 23, 2011  
Sec. Of State  
Isellers

Signature of member or an authorized representative of a member

Electronic Signature: TIMOTHY LEE BRYANT

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.