

L11000099702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**EXAMINER**

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 27, 2011

DREW BOCCHETTI  
P.O. BOX 602  
ELFERS, FL 34680

SUBJECT: CUDIXS, LLC  
Ref. Number: L11000099702

We have received your document for CUDIXS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 011A00022288

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cudixs, 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:

Drew Bocchetti  
Name of Person

Cudixs, LLC  
Firm/Company

P.O. Box 602  
Address

Elfers, FL 34680  
City/State and Zip Code

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

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2011 OCT -3 AM 10:27  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

For further information concerning this matter, please call:

Drew Bocchetti at ( 727 ) 534-1481  
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:  
Cudixs, 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:

Forgot to add myself as a mgrm. Please add Drew Bocchetti as a MGRM.

Change Elaina Murphy to MBR.

**OR**

- ☐ Was defectively signed. The manner in which the document was defective, the appropriate correction are as follows:

Dated: August 30 2011

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Drew Bocchetti

\_\_\_\_\_  
Typed or printed name of signee

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

2011 OCT 3 10 01 AM  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

FILED