

L11000127434

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
NOV 15 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Italiano's WPB, 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:

Joe Carosella

Name of Person

Italiano's WPB, LLC

Firm/Company

101 Plaza Real South, Suite 200

Address

Boca Raton, FL. 33432

City/State and Zip Code

Accounting@rpg123.com

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

For further information concerning this matter, please call:

Roz Schulman

Name of Person

at (561) 961-1734

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: Italiano's WPB, LLC L11000127434

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:
This form is to correct the spelling of the name of the limited liability company
from Italianos' WPB, LLC to the correct spelling Italiano's WPB, LLC. Also, the
Manager name is spelled incorrectly and is to be changed to Italiano's WPB,
Manager, Inc.

OR

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

Dated: November 9, 2011

Signature of a member or authorized representative of a member

Joe Carosella

Typed or printed name of signee

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

L11000127434
FILED 8:00 AM
November 08, 2011
Sec. Of State
dbuce

Article I

The name of the Limited Liability Company is:

ITALIANOS' WPB, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

101 PLAZA REAL SOUTH
SUITE 200
BOCA RATON, FL. 33432

The mailing address of the Limited Liability Company is:

101 PLAZA REAL SOUTH
SUITE 200
BOCA RATON, FL. 33432

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:

JOE CAROSELLA
101 PLAZA REAL SOUTH
SUITE 200
BOCA RATON, FL. 33432

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: JOE CAROSELLA

Article V

The name and address of managing members/managers are:

Title: MGR
ITALIANOS' WPB MANAGER, INC.
101 PLAZA REAL SOUTH, SUITE 200
BOCA RATON, FL. 33432

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November 08, 2011
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Signature of member or an authorized representative of a member

Electronic Signature: JOE CAROSELLA

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.