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COVER LETTER

то:	Registration Section Division of Corporations				
SUBJE	cr: We Be Soap 1	Juts, LLC			
	Name of Limited Liability Co	ompany			
Dear Sir	or Madam:				
The enci	losed Articles of Correction and fee(s) are submitted for filing	•			
Please re	eturn all correspondence concerning this matter to the following	ng:			
<u>8</u>	rian Wirgay Name of Person	_			
We	Be Soap Nuts, LLC	_			
810	11 Villa Pt (21)	_			
	Vando FL 32810 City/State and Zip Code	_			
<u> </u>	awo397@hotmail, Commail address: (to be used for future annual report notification)	_			
For further information concerning this matter, please call:					
	Name of Person at (321) Area C	263-0/69 ode & Daytime Telephone Number			
Registrate Division Clifton E 2661 Exe	T/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle see, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclose	d is a check for the following amount:				
\$25 F	iling Fee \$\bigcup \$30 Filing Fee & \$\bigcup \$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy			

ARTICLES OF CORRECTION

	ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY	TI NOV
Pursua busine in Flor	ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY int to section 608.4115, F.S., this document is being submitted within the required 30 cases days to correct the attached articles of organization or application to transact busing ida. The name of the limited liability company is:	22 25 35 37 37 37
FIRST	The name of the limited liability company is: WE BE SOAP NUTS, LLC	3
<u>SECO</u>	ND: The articles of organization or the application to transact business	
(CH	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMEN	T
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Want Florida limited liability Company effective as January 1, 2012.	5 <i>0</i>
	OR Was defectively signed. The manner in which the document was defectively signed at the appropriate correction are as follows:	nd
Dated:	Signature of a member or authorized representative of a member Byian G. Wiyau Typed or printed name of signee	

Filing Fee:

\$25.00

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\$30.00 (optional)