

L11000133075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

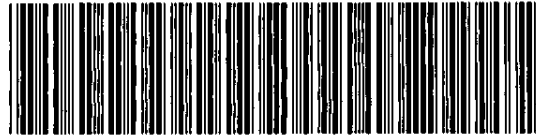
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 NOV 29 PM 3:41

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

11 NOV 29 PM 3:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan NOV 29 2011

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ARROUND THE CLOCK COOLING, 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:

JAMES DAVIS

Name of Person

UNITED CRS, INC

Firm/Company

327 HOLLOW CREEK LN

Address

HAVANA, FL 32333

City/State and Zip Code

cc@unitedcrs.com

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

For further information concerning this matter, please call:

JAMES DAVIS

Name of Person

at ( 850 )

322-7117  
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:  
                                 **AROUND THE CLOCK COOLING, 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:

**AROUND THE CLOCK COOLING, LLC**

**HAD A TYPO -> Should Have Been**

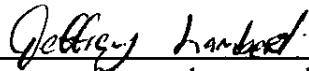
**AROUND THE CLOCK COOLING, LLC**

**OR**



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

Dated: November 28, 2011.



Signature of a member or authorized representative of a member

**JEFFERY LAMBERT**

Typed or printed name of signee

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

**FILED**  
11 NOV 29 PM 3:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

L11000133075  
FILED 8:00 AM  
November 23, 2011  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:  
AROUND THE CLOCK COOLING, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
29225 SHIRLEY SHORES ROAD  
TAVARES, FL. 32778

The mailing address of the Limited Liability Company is:  
29225 SHIRLEY SHORES ROAD  
TAVARES, FL. 32778

**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:  
TRICIA GRACE  
29225 SHIRLEY SHORES RD  
TAVARES, FL. 32778

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: TRICIA GRACE

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
TRICIA GRACE  
29225 SHIRLEY SHORES RD  
TAVARES, FL. 32778

Title: MGRM  
JEFFERY LAMBERT  
29225 SHIRLEY SHORES RD  
TAVARES, FL. 32778

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FILED 8:00 AM  
November 23, 2011  
Sec. Of State  
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### **Article VI**

The effective date for this Limited Liability Company shall be:

11/22/2011

Signature of member or an authorized representative of a member

Electronic Signature: TRICIA GRACE

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.