

L11000143133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

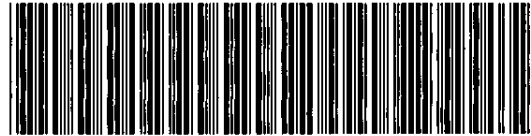
(Business Entity Name)

(Document Number)

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J. SAULSBERRY
EXAMINER

JAN _4 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JW Professional Tax Services, LLC (L11000143133)
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:

Judith A. Wallace

Name of Person

JW Professional Tax Services, LLC

Firm/Company

1551 Veracruz Lane

Address

Weston, FL 33327

City/State and Zip Code

cabjcc4@bellsouth.net

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

For further information concerning this matter, please call:

Judith A. Wallace

Name of Person

at (954)

605-1195

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

CR2E062 (08/05)

FILED
2011 DEC 30 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:
 JW Professional Tax Services, 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:
Effective date 12/21/2011 . Please correct effective date to show 01/01/20012

OR



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

Dated: December 22 , 2012

Signature of a member or authorized representative of a member

Judith A Wallace

Typed or printed name of signee

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

2011 DEC 30 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED