

L12000005099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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DIVISION OF CERTIFICATIONS

O SIMMONS

DEC 06 2016

Mark R. Komray, Esq.

Attorney & Counselor at Law

1882 N. Tamiami Trail #3434

Fort Myers, Florida 33918

Direct Phone: 239-244-2245 & E-Mail: mrk@komraylaw.com

Admitted to Practice:

Florida & Georgia &

Supreme Court of United States of America

Florida Supreme Court

Certified County & Civil Mediator

November 29th, 2016

Via USPS 1st Class

Amendment Section

ATTN: Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

*RE: Re-submission to Statement of Correction for Florida LLC
BOLCOR CONSTRUCTION GROUP, LLC*

Dear Florida Department of State- Division of Corporations;

Please find the following documents enclosed, for the re-submission of the Statement of Correction for:

- BOLCOR CONSTRUCTION GROUP, LLC.
- Fl. Doc. No. L12000005099

Additionally, and as stated in previous correspondence, your offices should be in receipt of the original payment for filing fees.

As always, if there are any questions or concerns, please do not hesitate to contact me.

Respectfully,



Kaylie Komray

LEGAL ASSISTANT

KSK@KOMRAYLAW.COM

ENC: As Stated.

RECEIVED
2016 DEC -2 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Bolcor Construction Group, LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark R. Komray, Esq.

Name of Person

Attorney at Law

Firm/Company

1882 N. Tamiami Trail, #3434

Address

Ft. Myers, FL 33918

City/State and Zip Code

mrk@komraylaw.com

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

For further information concerning this matter, please call:

Mark R. Komray, Esq.

at (**239**)

244-2245

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

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Bolcor Construction Group, LLC

SECOND: The Florida Document number of the limited liability company is: L12000005099

THIRD: Document to be corrected is: Articles of Amendment to Article of Organization, filed 4-21-2016

(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:

The incorrect statements are: "Remove, MGRM, Ryan Quartuccio";

"Remove, MGR, John Christensen" & " MGRM Kristopher Bollinger"

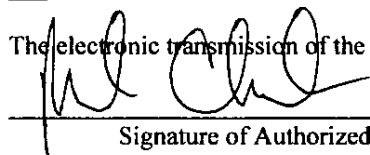
The correct statements are: "Remove MGRM Kristopher Bollinger" & "Add MGRM, Ryan Quartuccio"

OR

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

OR

- ☐ The electronic transmission of the record was defective.



Signature of Authorized Representative

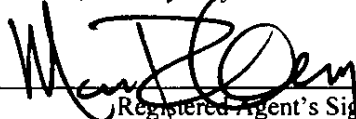
11-7-16

Date

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Registered Agent's Signature

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