L12000011815

(Requestor's Name)						
, (Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



600219249436

01/31/12--01023--005 **25.00

12 JAN 31 PM 12: 06
SECRETARY OF STATE
TALL AHASSEE FLORIES

COVER LETTER

TO:	Registratio Division of	n Section Corporations			*		
SUBJE	ECT:	MI	RAM VA	RGAS	, LLC		
	Name of Limited Liability Company						
Dear Si	ir or Madam:						
The end	closed Article	es of Correction and fee(s)	are submitted	for filing.			
Please 1	return all cor	respondence concerning thi	is matter to th	e followin	g:		
		KARIN G NELSON	N		_		
		Name of Person					
F	PROFESS	IONAL TAX CONSU	JLTANTS I	NC_	_		
		Firm/Company			_		
		314 AVENUE K, S	E		_		
		Address			-		
_	W	INTER HAVEN, FL 3	33880				
		City/State and Zip Code			_		
	mi	riam.vargas1@yaho	o.com		_		
E-	-mail address	: (to be used for future anni	ual report not	ification)	_		
For furt	her informati	ion concerning this matter,	please call:				
	1/ 0	rin C Noloon		062	294-5462		
		nrin G Nelson me of Person	at (Area Co	ode & Daytime Telephone Number		
Registra Division Clifton 2661 Ex	ET/COURIE ation Section n of Corporat Building secutive Cent ssee, Florida	ter Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclose	ed is a check	for the following amount	:				
√ \$25 I	Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filin Certified	ng Fee & I Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: MIRIAM VARGAS, LLC								
<u>SECO</u>	ND: 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: THE LLC NAME WAS MISSPELLED. ORIGINAL AS FILED WAS MIRAM								
	VARGAS, LLC. THE CORRECT SPELLING IS MIRIAM VARGAS, LLC. ALI								
	OTHER STATEMENTS ARE CORRECT.								
		_							
	OR Was defectively signed. The manner in which the document was defective the appropriate correction are as follows:	ly signed a	ınd						
	The appropriate correction are as foliows.		<u> </u>						
		ALL!	วี 						
		A. I.	Ē.,						
		RY OF SEE, F							
		STATI LORID							
Dated:	JANUARY 26	∑m o	r						
	Kasiw & Yelsow EA Signature of a member or authorized representative of a member								
	KARIN G NELSON, authorized representative								
Typed or printed name of signee									
	Filing Fee: \$25.00								

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L12000011815 FILED 8:00 AM January 25, 2012 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is: MIRAM VARGAS, LLC

Article II

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

6746 HILLIS DR LAKELAND, FL. US 33813

The mailing address of the Limited Liability Company is:

6746 HILLIS DR LAKELAND, FL. US 33813

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:

MIRIAM VARGAS 6746 HILLIS DR LAKELAND, FL. 338130811

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: MIRIAM VARGAS

Article V

The name and address of managing members/managers are:

Title: MGRM MIRIAM VARGAS 6746 HILLIS DR LAKELAND, FL. 338130811 US L12000011815 FILED 8:00 AM January 25, 2012 Sec. Of State nculligan

Article VI

The effective date for this Limited Liability Company shall be: 02/01/2012

Signature of member or an authorized representative of a member

Electronic Signature: MIRIAM VARGAS

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.