

L1200002779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

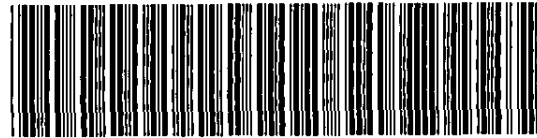
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/29/12--01019--014 **25.00

RECEIVED
12 MAR 29 PM 12:22
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
12 MAR 29 AM 8:49
SECRETARY OF STATE
DIVISION OF CORPORATIONS

MAR 30 2012

T. HAMPTON

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

1851 Holdings, LLC

Signature _____

Requested by: SETH

03/29/12

Name

Date

Time

Walk-In

Will Pick Up

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- ☒ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1851 Holdings, 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:

Jeffrey B Strouse

Name of Person

Firm/Company

2821 Blue Springs Place

Address

Wesley Chapel, FL 33544

City/State and Zip Code

angelas1234@aol.com

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

For further information concerning this matter, please call:

Jeffrey Strouse

Name of Person

at (813)

240-5251

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)

**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:
1851 Holdings, 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:

Jeffrey B. Strouse, is not a Managing Member of the LLC, and was listed

erroneously in Article IV. The corrected reading for Article IV is as follows:

Angela M. Strouse, Managing Member, 2821 Blue Springs Place,

Wesley Chapel, Fl, 33544

OR



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

Dated: March 29, 2012

Angela M Strouse
Signature of a member or authorized representative of a member

Angela M Strouse

Typed or printed name of signee

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

FILED

2012 FEB 27 AM 8:33

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLES OF ORGANIZATION FOR

1851 Holdings, LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **1851 Holdings, LLC**

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 29 AM 8:49**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **281 Blue Springs Place, Wesley Chapel, FL 33544**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Jeffrey B. Strouse., 281 Blue Springs Place,
Wesley Chapel, FL 33544**

ARTICLE IV: MANAGING MEMBER

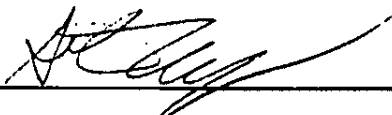
The name and address of the initial Managing Member of the company is:

Jeffrey B. Strouse., Managing Member, 281 Blue Springs Place, Wesley Chapel, FL 33544

Angela M. Strouse., Managing Member, 281 Blue Springs Place, Wesley Chapel, FL 33544

The undersigned being neither a member or manager of the LLC has executed these Articles of
Organization as an authorized representative on this 27th day of February 2012.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



Authorized Representative

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

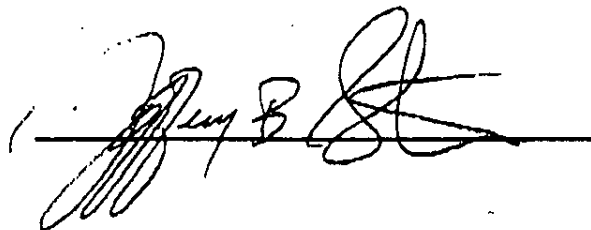
1. The name of the company is:

1851 Holdings, LLC

2. The name and address of the registered agent and office is:

Jeffrey B Strouse
2821 Blue Springs Place
Wesley Chapel, FL 33544

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.



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TALLAHASSEE, FLORIDA

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