L12000052165

Office Use Only



100258825481

04/15/14--01003--019 **30.00



B. BOSTICK APR **16** 2014

EXAMINER

COVER LETTER

	gistration Section , vision of Corporations			
	IDEAS A&Q, LLC.			
SUBJECT		Name of Limited Liab	oility Company	_
Dear Sir or	Madam:			
The enclose	d Statement of Correction and fee(s)	are submitted for filin	g.	
Please retur	n all correspondence concerning this	matter to the following	g:	
JOSE G	. ATANES			
	Name of Person		_	
IDEAS A	.&Q, LLC.			
	Firm/Company		_	
3783 PF	ESCOTT LOOP			
	Address	-	_	
LAKELA	ND, FLORIDA 33810			,
	City/State and Zip Code	<u> </u>	_	
ideasaq	@gmail.com			
E-mai	l address: (to be used for future annu	al report notification)	_	
				•
For further	information concerning this matter, p	olease call:		
Jose G. Atanes		863	738 3412	
	Name of Person	at (Area Code	Daytime Telephone Number	->· ' -
Registration Division of Clifton Buil 2661 Execu	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is	a check for the following amount:	, ,		
□ \$25 Filin	g Fee \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (2/14)			

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. The name of the limited liability company is: \DEAS AAQ LLC FIRST: The Florida Document number of the limited liability company is: \(\subset \lambda \rangle \lambda \rangle \lambda \rangle \ra **SECOND:** THIRD: Document to be corrected is: ARTICLES OF ORGANIZATION (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: ARTICLE VI(Authorized Person(s)): The names of the two authorize persons are incorrect (J. Gerardo Atanes & M. Victoria Querejeta); the corrected names are Jose G. Atanes & Maria V. Querejeta <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transphission of the record was defective. Signature of Authorized Representative Date

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)