# L1200061591

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12 MAY 18 PH 2: 38
SECRETARY OF STATE
ALL AHASSEE, FLORIDJ

## COVER LETTER

Registration Section

Division of Corporations

Solutions Key West LLC SUBJECT: 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: Barry Haiman Name of Person Affordable Housing Solutions for Florida Firm/Company 1108 Kane Concourse, Suite 307 Address Bay Harbor Islands, FL 33154 City/State and Zip Code bhaiman@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nicole Cheshire Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E062 (08/05)

# ARTICLES OF CORRECTION FOR

FILED

### FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY MAY 18 PM 2: 38

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 OF STATE business days to correct the attached articles of organization or application to tradsact business FLORIDA in Florida.

<u>FIRST</u>	The name of the limited liability company is: Solutions Key West LLC
SECO	ND: The articles of organization or the application to transact business
(CH	ECK 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 names of the Registered Agent and Member are reversed.
	The Agent should be Barry Haiman and the Member should be Affordable
	Housing Solutions for Florida.
	<u>OR</u>
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
Dated:	May 16 2012.
	Signature of a member or authorized representative of a member
	Barry Haiman
	Typed or printed name of signee
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

#### Electronic Articles of Organization For Florida Limited Liability Company

L12000061591 FILED 8:00 AM May 07, 2012 Sec. Of State nculligan

#### Article I

The name of the Limited Liability Company is: SOLUTIONS KEY WEST LLC

#### **Article II**

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

1108 KANE CONCOURSE 307 BAY HARBOR ISLANDS, FL. US 33154

The mailing address of the Limited Liability Company is:

1108 KANE CONCOURSE 307 BAY HARBOR ISLANDS, FL. US 33154

#### 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:

AFFORDABLE HOUSING SOLUTIONS FOR FLORIDA 1108 KANE CONCOURSE 307 BAY HARBOR ISLANDS, FL. 33154

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: BARRY HAIMAN

#### Article V

The name and address of managing members/managers are:

Title: PS BARRY HAIMAN 1108 KANE CONCOURSE 307 BAY HARBOR ISLANDS, FL. 33154 L12000061591 FILED 8:00 AM May 07, 2012 Sec. Of State nculligan

Signature of member or an authorized representative of a member

Electronic Signature: BARRY HAIMAN

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.