

#L12000064817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

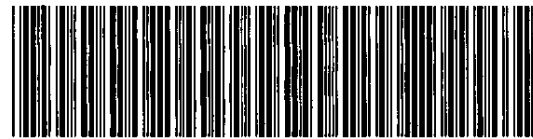
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
JUN 7 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D & O IMPORTS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICARDO DE LA PAZ

Name of Person

132

Firm/Company

13271 SW 98 ST

Address

MIAMI FL 33186

City/State and Zip Code

RDP ACCOUNTING @ 44100. COM.

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

For further information concerning this matter, please call:

RICARDO DELAPAZ

Name of Person

at (786) 286 9478

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED
12 JUN -6 PM 12:30

SECRETARY OF STATE
TREASURER OF FLORIDA

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: D&O IMPORTS 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:

NEED TO REMOVE OFFICER OSCAR JUSTINIANO

OR



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

Dated: 05/29/12

Daniel J.
Signature of a member or authorized representative of a member

DANIEL JUSTINIANO

Typed or printed name of signee

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