

L120000085632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

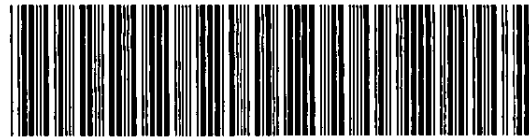
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*Correction*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 JUL 23 AM 9:40

FILED

J. SAULSBERRY  
EXAMINER

JUL 24 2012

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Chris' Plumbing & Backflow, 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:

Christopher Sequeira

Name of Person

Chris' Plumbing & Backflow, LLC.

Firm/Company

1686 SE 13th Street

Address

Stuart, Florida 34996

City/State and Zip Code

CSPlumber@bellsouth.net

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

For further information concerning this matter, please call:

Christopher Sequeira

Name of Person

at ( 772 )

341-4918

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)

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2012 JUL 23 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:  
                                 Chris' Plumbing & Backflow, 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:

Christopher J Sequeira is the incorrect statement in Article IV. It was a miss typed

The correction should be Christopher Sequeira, no middle initial.

**OR**



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

Dated: July 20, 2012

Signature of a member or authorized representative of a member

Christopher Sequeira

Typed or printed name of signee

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

2012 JUL 23 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED