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AND  
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D. BRUCE

AUG 16 2012

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PARKEREMMA, 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:

BRUCE P. CHAPNICK, ESQ

Name of Person

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG

Firm/Company

2033 MAIN STREET, SUITE 600

Address

SARASOTA, FL 34237

City/State and Zip Code

bchapnick@icardmerrill.com

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

For further information concerning this matter, please call:

BRUCE P. CHAPNICK

Name of Person

at ( 941 )

366-8100

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)

APPROVED  
AND  
FILED

12 AUG 15 AM 11:05  
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:  
PARKEREMMA, 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:

SEE EXHIBIT A ANNEXED HERETO AND MADE A PART HEREOF

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OR**



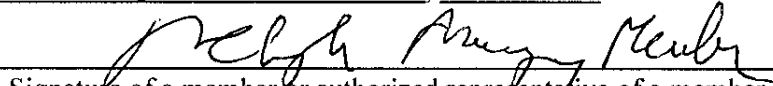
Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated: August 14, 2012.

  
Signature of a member or authorized representative of a member

Bruce P. Chapnick, Managing Member

Typed or printed name of signee

**Filing Fee:** \$25.00

**Certified Copy:** \$30.00 (optional)

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TALLAHASSEE, FLORIDA

**EXHIBIT A TO ARTICLE SECOND OF ARTICLES OF CORRECTION FOR  
PARKEREMMA, LLC**

Article V only includes one managing member and there are three managing members. This was in advertent error in failing to list the other two managing members. The three managing members names and addresses are:

Nicole L. Chapnick  
8 Town Square Blvd., Apt. 310  
Asheville, NC 28803

Sandra R. Chapnick  
5518 Avellino Place  
Sarasota, FL 34238

Bruce P. Chapnick  
5518 Avellino Place  
Sarasota, FL 34238

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TALLAHASSEE, FLORIDA

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

L12000103547  
FILED 8:00 AM  
August 13, 2012  
Sec. Of State  
jbryan

**Article I**

The name of the Limited Liability Company is:

PARKEREMMA, LLC

**Article II**

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

5518 AVELLINO PLACE  
SARASOTA, FL. US 34202

The mailing address of the Limited Liability Company is:

5518 AVELLINO PLACE  
SARASOTA, FL. US 34202

**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:

BRUCE P CHAPNICK  
2033 MAIN STREET  
SUITE 600  
SARASOTA, FL. 34237

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: BRUCE P. CHAPNICK

### Article V

The name and address of managing members/managers are:

Title: MGRM  
NICOLE L CHAPNICK  
8 TOWN SQUARE BLVD, APT 310  
ASHEVILLE, NC. 28803 US

L12000103547  
FILED 8:00 AM  
August 13, 2012  
Sec. Of State  
jbryan

Signature of member or an authorized representative of a member

Electronic Signature: NICOLE L. CHAPNICK

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.