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B. BOSTICK

OCT 1 0 2012

EXAMINER

## **COVER LETTER**

	on Section of Corporations	
SUBJECT:	PAUL & NAAM	A LLC
	Name of Limited Liability	Company
Dear Sir or Madam	ı:	
The enclosed Artic	les of Correction and fee(s) are submitted for fili	ing.
Please return all co	prespondence concerning this matter to the follow	wing:
	HADASSA ZARFATY	
	Name of Person	<del></del>
-	Firm/Company	
1	1074 NW 85TH TERRACE	
	Address	
	PLANTATION, FL 33322	
	City/State and Zip Code	<del></del>
	· · · · · · · · · · · · · · · · · · ·	<u>ن</u> 1
N	REPINSKI@RSRTAX.COM	f .
E-mail addres	ss: (to be used for future annual report notification	<del>on)</del>
		,
		on)
For further informa	ation concerning this matter, please call:	\\\\\\\\\\.
N	IDIA REPINSKI at ( 954	742-4494
		a Code & Daytime Telephone Number
STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Ce Tallahassee, Florid	on rations enter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a chec	k for the following amount:	
\$25 Filing Fee	\$30 Filing Fee & \$55 Filing Fee Certificate of Status Certified Copy	
CR2E062 (08/05)	•	

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

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is: PAUL & NAAMA LLC  L\2^0	0012633			
SECO:	ND: The articles of organization or the application to transact business				
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u>ATEMENT</u>			
$\checkmark$	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
	NAME CORRECTION FOR REGISTERED AGENT AND MANAGER				
	HADASSA ZARFATY - FIRST NAME WAS MISSPELLED ON ARTIC	CLES OF			
	ORGANIZATION.				
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
		; <u></u>			
Dated:	OCTOBER 4TH , 2012 .	2 OCT -9			
	Signature of a member or authorized representative of a member				
	HADASSA ZARFATY	<u>ω</u> ω			
Typed or printed name of signee					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				

مرا المعتد المعتد