

L12000 128243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

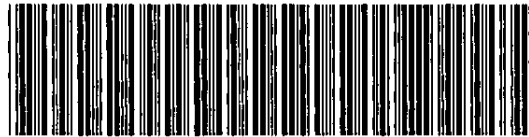
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Correction

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 OCT 19 AM 8:40

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J. SAULSBERRY
EXAMINER

OCT 25 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JB2DESIGN, 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:

JEFFERY L. BRADY
Name of Person

JB2DESIGN, LLC
Firm/Company

3470 EAST COAST AVE, SUITE 302
Address

MIAMI, FL 33137
City/State and Zip Code

JEFFBRADY@MAIL.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JEFFERY BRADY at (412) 452-5995
Name of Person 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

**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: JB2DESIGN, 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:

THE ADDRESS IS LISTED AS: 3407 EAST COAST AVE,
SUITE 302, MIAMI, FL 33137, BUT SHOULD BE

3470 EAST COAST AVE, SUITE 302, MIAMI, FL ~~33137~~
33137

OR


THIS IS CORRECT.



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

N/A

Dated: 10/15/2012



Signature of a member or authorized representative of a member

JEFFERY L. BRADY

Typed or printed name of signee

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED