

L12000144079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

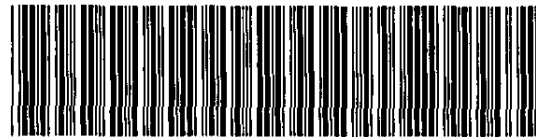
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800241901938

12/18/12--01001--010 **25.00

RECEIVED
12 DEC 17 PM 11:06
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED
12 DEC 17 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC 17 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SUNSET TROPIKOOL ENTERPRISES, 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:

G. SOHACKI

Name of Person

Firm/Company

P.O. BOX 66201

Address

ST. PETERSBURG, FL 33736

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Person

at ()

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 DEC 17 PM 5:18

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:
SUNSET TROPIKOOL ENTERPRISES, LLC #L12000144079

SECOND: The articles of organization or the application to transact business

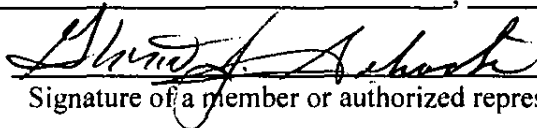
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
- Contains an incorrect statement. The effective date was listed wrong. It should be January 1, 2013.
The MGRM by the name of Gene S. Gallo was listed in error, please remove. The name of the registered agent was listed wrong, and the corrected name should be Gloria J. Sohacki at the same address.
See attached page for signature of registered agent.

OR

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

Dated: December 12, 2012



Signature of a member or authorized representative of a member

Gloria J. Sohacki

Typed or printed name of signee

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

12 DEC 17 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED


APPROVED
AND
FILED

12 DEC 17 PM 5:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

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

L12000144079
FILED 8:00 AM
November 14, 2012
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:
SUNSET TROPIKOOL ENTERPRISES, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1276 MAIN ST
DUNEDIN, FL. US 34698

The mailing address of the Limited Liability Company is:
P.O. BOX 66201
SAINT PETERSBURG, FL. 33736

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:
GENE S GALLO
1276 MAIN ST
DUNEDIN, FL. 34698

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: GENE S. GALLO

Article V

The name and address of managing members/managers are:

Title: MGRM
GLORIA J SOHACKI
1276 MAIN ST
DUNEDIN, FL. 34698 US

Title: MGRM
GENE S GALLO
1276 MAIN ST
DUNEDIN, FL. 34698 US

L12000144079
FILED 8:00 AM
November 14, 2012
Sec. Of State
dbruce

Article VI

The effective date for this Limited Liability Company shall be:

11/08/2012

Signature of member or an authorized representative of a member

Electronic Signature: GENE S. GALLO

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.