

L13000005443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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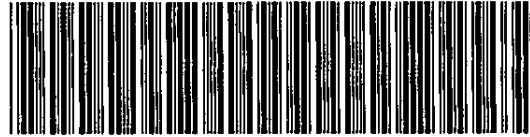
(Business Entity Name)

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FILED  
2013 JAN 16 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 17 2013

J. BRYAN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Madison Social Tallahassee 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:

**Matthew Thompson**

Name of Person

**Madison Social Tallahassee LLC**

Firm/Company

**2107 Ellicott Dr**

Address

**Tallahassee, FL 32308**

City/State and Zip Code

**jedwards@efs-advisors.com**

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

For further information concerning this matter, please call:

**Brian McKenna**

Name of Person

at ( **201** ) **344 - 4795**

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:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

CR2E062 (08/05)

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2013 JAN 16 PM 1:45  
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:  
MADISON SOCIAL TALLAHASSEE 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:

Brian Edwards was as a MGRM was incorrectly spelled of the Madison Social Tallahassee LLC,

his correct spelling of his name is Brian McKenna

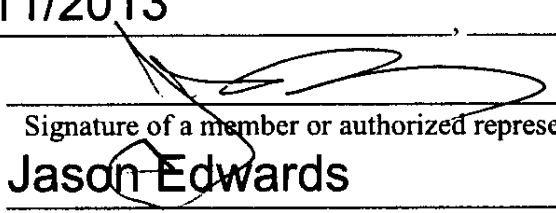
**OR**



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

Dated:

01/11/2013

  
Signature of a member or authorized representative of a member

Jason Edwards

Typed or printed name of signee

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

**FILED**  
2013 JAN 16 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

L13000005443  
FILED 8:00 AM  
January 10, 2013  
Sec. Of State  
jsaulsberry

**Article I**

The name of the Limited Liability Company is:  
MADISON SOCIAL TALLAHASSEE LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
705 S. WOODWARD AVE  
UNIT 101  
TALLAHASSEE, FL. 32304

The mailing address of the Limited Liability Company is:  
2107 ELLICOTT DR  
TALLAHASSEE, FL. 32308

**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:  
MATTHEW J THOMPSON  
2107 ELLICOTT DR  
TALLAHASSEE, FL. 32308

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: MATTHEW THOMPSON

FILED  
2013 JAN 16 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### Article V

The name and address of managing members/managers are:

Title: MGRM  
BRIAN EDWARDS  
344 E 63RD STREET 4C  
NEW YORK, NY. 10065

Title: MGRM  
MATTHEW J THOMPSON  
2107 ELLICOTT DR  
TALLAHASSEE, FL. 32308

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FILED 8:00 AM  
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### Article VI

The effective date for this Limited Liability Company shall be:

01/09/2013

Signature of member or an authorized representative of a member

Electronic Signature: BRIAN EDWARDS

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.

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TALLAHASSEE, FLORIDA