

L13000020680

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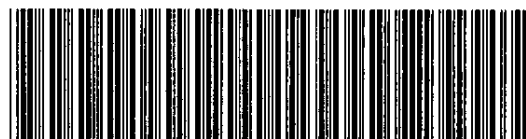
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FILED
2013 FEB 22 PM 12:24
U.S. DISTRICT COURT
SOUTHERS DISTRICT OF FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOFFMAN-VAN VORST & ASSOCIATES, CPAS PLLC
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:

Leonard Hoffman

Name of Person

Hoffman-Van Vorst & Associates, CPAS PLLC

Firm/Company

950 N Federal Highway

Address

City/State and Zip Code

Pompano Beach, FL 33062

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

For further information concerning this matter, please call:

Larry V. Bishins

Name of Person

at (954) 772-7900

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

CR2E062 (08/05)

FILED
2013 FEB 22 PM 12:24
SEC. OF STATE
TALLAHASSEE, FL

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:

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:

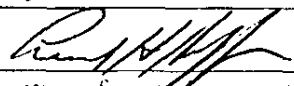
Article I The name of the Limited Liability Company is:

HOFFMAN, VAN VORST & ASSOCIATES, CPAS PL

OR

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

Dated: February 14, 2013


Signature of a member or authorized representative of a member

Leonard Hoffman, Mgr

Typed or printed name of signee

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

FILED
2013 FEB 22 PM 12:24

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

L13000020680
FILED 8:00 AM
February 08, 2013
Sec. Of State
Isellers

Article I

The name of the Limited Liability Company is:
HOFFMAN-VAN VORST & ASSOCIATES, CPAS PLLC

Article II

The street address of the principal office of the Limited Liability Company is:
950 N FEDERAL HIGHWAY
SUITE 219
POMPANO BEACH, FL. US 33062

The mailing address of the Limited Liability Company is:
950 N FEDERAL HIGHWAY
SUITE 219
POMPANO BEACH, FL. US 33062

Article III

The purpose for which this Limited Liability Company is organized is:
CERTIFIED PUBLIC ACCOUNTANT

Article IV

The name and Florida street address of the registered agent is:
LEONARD H HOFFMAN
950 N FEDERAL HIGHWAY
SUITE 219
POMPANO BEACH, FL. 33062

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: LEONARD H HOFFMAN

Article V

The name and address of managing members/managers are:

Title: MGR
LEONARD H HOFFMAN
950 N FEDERAL HIGHWAY, SUITE 219
POMPANO BEACH, FL. 33062 US

L13000020680
FILED 8:00 AM
February 08, 2013
Sec. Of State
Isellers

Signature of member or an authorized representative of a member

Electronic Signature: LACEY FUELL, LEGALZOOM.COM, INC.

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.