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## COVER LETTER

Registration Section
Division of Corporations

TO:

CR2E062 (08/05)

SUBJECT: ARIANA M SOMOZA, L	LC				
Name of Limited Liability Co					
Dear Sir or Madam:					
The enclosed Articles of Correction and fee(s) are submitted for filing					
The enclosed Articles of Correction and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
CARL M JUGARMAN  Name of Person	<del></del>				
Name of Person					
CARL M SJGARMAN PA	_				
17345 S. DIXIE HIGHWAY					
Address					
PALMEHO BAY, FLORIDA 33/	57				
CSUGARMAN OS UGARMAN FLORIDA, COM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
CARL M SUGARMAN at 305 Name of Person Area C	2536100				
Name of Person Area Co	ode & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section				
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
\$25 Filing Fee \$\to\$ S25 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 <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.

FIRST	The name of the limited liability company is:  ARIANA M SOMOZA, LC		_
<u>SECO</u>	,		
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	ATEMENT	
abla	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  THE NAME ARIANA M SOMOZA, LCC 15		
	INCORRECT BECAUSE IT DOES NOT MATCHT	HE REAL E	STATE LICENSE
	THE CORRECTED NAME IS:		_
	ARIANA MARIA SOMOZA, LLC		_
	<u>OR</u>		
	Was defectively signed. The manner in which the document was defectivel the appropriate correction are as follows:	y signed and	
		3 R	The special section of
Dated:	Feb 26, 2013.  Day A fraction Est  Signature of a member or authorized representative of a member	PM 3: 19	B
	CARL M SUGARMAN, ESQ  Typed or printed name of signee		
	Filing Fee: \$25.00		

\$30.00 (optional)

Certified Copy:

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

L13000026907 FILED 8:00 AM February 21, 2013 Sec. Of State isellers

#### Article I

The name of the Limited Liability Company is: ARIANA M SOMOZA, LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:

7350 SW 89 STREET SUITE 604 MIAMI, FL. US 33156

The mailing address of the Limited Liability Company is:

7350 SW 89 STREET SUITE 604 MIAMI, FL. US 33156

#### **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:

CARL M SUGARMAN 17345 S DIXIE HWY PALMETTO BAY, FL. 33157

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: CARL M SUGARMAN

Article V

The name and address of managing members/managers are:

Title: MGRM ARIANA BLANCO 7350 SW 89 STREET #604 S MIAMI, FL. 33156 US L13000026907 FILED 8:00 AM February 21, 2013 Sec. Of State Isellers

Signature of member or an authorized representative of a member

Electronic Signature: CARL M SUGARMAN

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.