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13 APR -2 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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13 APR -2 PM 4:33

K. SALY  
EXAMINER  
APR 8 2013



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 572689 7929636

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : March 15, 2013

ORDER TIME : 2:30 PM

ORDER NO. : 572689-011

CUSTOMER NO: 7929636

DOMESTIC AMENDMENT FILING

NAME: HOUSE OF PLEASURES LLC

EFFECTIVE DATE:

XX ARTICLES OF CORRECTION  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HOUSE OF PLEASURES 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:

EMILY COLEMAN  
Name of Person

HOUSE OF PLEASURES LLC  
Firm/Company

6410 SUITE 6 HWY 90  
Address

MILTON FL 32570  
City/State and Zip Code

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

For further information concerning this matter, please call.

EMILY COLEMAN at (781) 420-3777  
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

CR2E062 (08/05)

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

FILED  
13 APR -2 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: HOUSE OF PLEASURES 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 PRINCIPAL PLACE OF BUSINESS AND THE MAILING ADDRESS ARE INCORRECT AS:

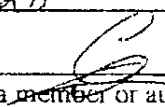
6410 SUITE G HWY 90 MILGON, FL 32570

THE ADDRESS SHOULD BE: 6410 SUITE G HWY 90 MILTON, FL 32570

**OR**

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

Dated: March 28 2013

  
Signature of a member or authorized representative of a member

ERIK COLON, MEMBER

Typed or printed name of signee

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