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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Avelen Paint Services 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:

Christian Arellaneda
Name of Person

Avelen Paint Services LLC
Firm/Company

821 Crenshaw Lake Rd
Address

Lutz, FL 33548
City/State and Zip Code

AvelenPaintServices@gmail.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Christian Arellaneda at (813) 843-8774
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

**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:

Avelen Paint Services 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:

There was no manager/member listed.

The manager/member should be listed as
Christian Avellaneda.

OR



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

Dated: April 17, 2013


Signature of a member or authorized representative of a member

Christian Avellaneda

Typed or printed name of signee

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

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