

LI3000069910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

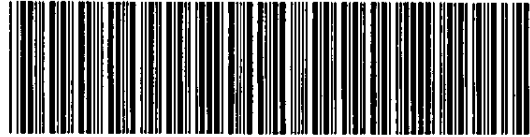
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400247563444

05/16/13--01003--022 **25.00

FILED

2013 MAY 16 PM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 17 2013
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dental Distraction, 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:

Robert Burson

Name of Person

Robert A. Burson, P.A.

Firm/Company

PO Box 1620

Address

Stuart, Florida 34995

City/State and Zip Code

slkuhns@gmail.com

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

FILED
2018 MAY 16 PM 4:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Bob Burson

Name of Person

at 772 286-1616

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:
Dental Distraction, 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:
In Article V, the last name of the 2nd member is incorrectly spelled as Lippish.
The correct spelling of the last name of the 2nd member is Lippisch.

OR

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

Dated: May 13, 2013

Robert A. Burson, attests

Signature of a member or authorized representative of a member

Robert A. Burson, authorized representative

Typed or printed name of signee

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

FILED
2013 MAY 16 PM 4:34
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

L13000069910
FILED 8:00 AM
May 13, 2013
Sec. Of State
kasaly

Article I

The name of the Limited Liability Company is:

DENTAL DISTRACTION, LLC

Article II

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

94 SOUTH RIVER ROAD
STUART, FL. US 34996

The mailing address of the Limited Liability Company is:

94 SOUTH RIVER ROAD
STUART, FL. US 34996

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:

SCOTT L KUHNS
3727 SE OCEAN BLVD.
SUITE 208
STUART, FL. 34996

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: SCOTT L. KUHNS

Article V

The name and address of managing members/managers are:

Title: MGRM
SCOTT L KUHN
3727 SE OCEAN BLVD., SUITE 208
STUART, FL. 34996 US

Title: MGRM
WILLIAM E LIPPISH
18 RIVERVIEW DRIVE
STUART, FL. 34996 US

L13000069910
FILED 8:00 AM
May 13, 2013
Sec. Of State
kasaly

Article VI

The effective date for this Limited Liability Company shall be:

05/13/2013

Signature of member or an authorized representative of a member

Electronic Signature: SCOTT L. KUHN

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.