

L130000-75954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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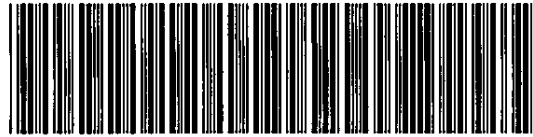
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 11 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERICAN BROKERS UNITED, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL GONZALEZ

Name of Person

AMERICAN BROKERS UNITED, LLC

Firm/Company

7535 SW 28 STREET

Address

DAVIE, FLORIDA 33314

City/State and Zip Code

americanbrokersunited@comcast.net

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

For further information concerning this matter, please call:

DANIEL GONZALEZ

at (754) 2348862

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 (2/14)

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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: AMERICAN BROKERS UNITED, LLC

SECOND: The Florida Document number of the limited liability company is: L13000075954

THIRD: Document to be corrected is:
TIN # 46-2843985 (NOT 48-...) Annual Report

(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:

OR

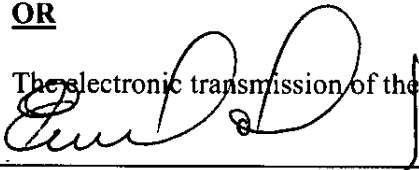
- ☒ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Please correct the first two digits of the defective document TIN #48-2843985

Correction: TIN # 46-2843985

OR

- ☐ The electronic transmission of the record was defective.



Signature of ~~Authorized~~ Representative

9/2/2014

Date

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

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