

C13000081469

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

SECRETARY OF STATE
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SAWSAN1, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sawsan1, LLC, a Florida Limited Liability Company
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:

Gary Silberman, Esq.

Name of Person

Law Offices of Gary Silberman, P.A.

Firm/Company

2665 South Bayshore Drive, Suite 725

Address

Coconut Grove, FL 33133

City/State and Zip Code

gary@silberman-law.com

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

For further information concerning this matter, please call:

Gary Silberman

Name of Person

at 305 285-0377

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 &
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☐ \$60 Filing Fee,
Certificate of Status &
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CR2E062 (4/13)

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TALLAHASSEE, FL 32314

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**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:

Sawsan1, LLC, a Florida Limited Liability Company

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:

Please remove Mohammed Sameh Hassanein, as Manager of the Company

which I inadvertently included in the initial articles upon filing.

OR



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

Dated: June 6, 2013

[Signature]
Signature of a member or authorized representative of a member

Mohammed Sameh Hassanein

[Signature]
Typed or printed name of signee

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

CR2E062 (4/13)

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