

L130000088169

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2014 APR 16 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan APR 17 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Maybeline's Sweet Delights 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:

Sherley Gonzales  
Name of Person

Maybeline's Sweet Delights LLC  
Firm/Company

137 S.W. Tulip Blvd  
Address

Port Saint Lucie, FL 34953  
City/State and Zip Code

msweetdelights@yahoo.com  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherley Gonzales at ( 910 ) 382-4664  
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

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

FILED  
2014 APR 16 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Maybeline's  
Sweet Delights LLC

**SECOND:** The Florida Document number of the limited liability company is: L13000088169

**THIRD:** Document to be corrected is:  
Title: Owner

**(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:

Title: Owner is incorrect, I would like  
it to read Title: AMBR.

**OR**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☐ The electronic transmission of the record was defective.

Signature of Authorized Representative

Date

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

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

L13000088169  
FILED 8:00 AM  
June 19, 2013  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:

MAYBELINE'S SWEET DELIGHTS LLC

**Article II**

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

2030 S.W BREVITY TER.  
PORT SAINT LUCIE, FL. US 34953

The mailing address of the Limited Liability Company is:

2030 S.W BREVITY TER.  
PORT SAINT LUCIE, FL. US 34953

**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:

FABIAN R GONZALES  
2030 S.W BREVITY TER.  
PORT SAINT LUCIE, FL. 34953

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: FABIAN R GONZALES

**Article V**

The effective date for this Limited Liability Company shall be:

06/18/2013

Signature of member or an authorized representative of a member

Electronic Signature: SHERLEY GONZALES

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.