

L13 000093563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STATION DELI LLC L130000 93563  
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:

PETER ROVIRA

Name of Person

STATION DELI LLC

Firm/Company

2441 SEVEN SPRINGS BLVD

Address

NEW PORT RICHAH FL 34655

City/State and Zip Code

P.ROVIRA9@GMAIL.COM

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

For further information concerning this matter, please call:

PETER ROVIRA

Name of Person

at (813) 503-5574

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:

STATION DELI LLC  
L130000 93563

**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:

MISS TYPE ON APPLICATION. APPLICATION SAYS  
STATION AND CORRECT NAME OF BUSINESS IS  
STATION DELI LLC

**OR**



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

Dated: 7/3/2013

  
Signature of a member or authorized representative of a member

PETER KOVIRA  
Typed or printed name of signee

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

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

L13000093563  
FILED 8:00 AM  
July 01, 2013  
Sec. Of State  
jbryan

**Article I**

The name of the Limited Liability Company is:

STAION DELI LLC

**Article II**

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

2441 SEVE SPRING BLVD  
NEW PORTRICHEY, FL. 34655

The mailing address of the Limited Liability Company is:

11304 LAUREL CREST LANE  
TAMPA, FL. 33624

**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:

PETER ROVIRA  
11304 LAUREL CREST LANE  
TAMPA, FL. 34655

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: PETER ROVIRA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
PETER ROVIRA  
11304 LAUREL CREST LANE  
TAMPA, FL. 33624

Title: MGRM  
DEBBIE A RIVERA  
11304 LAUREL CREST LANE  
TAMPA, FL. 33624

L13000093563  
FILED 8:00 AM  
July 01, 2013  
Sec. Of State  
jbryan

### **Article VI**

The effective date for this Limited Liability Company shall be:

06/27/2013

Signature of member or an authorized representative of a member

Electronic Signature: PETER ROVIRA

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.