L13000111635

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COVER LETTER

TO: Registration Section Division of Corporations

Total Arkitecture international 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:

Sabine Dedow	
Name of Person	
President	
Firm/Company	
3193 Ohio St	
Address	
Miami FL 33133	
City/State and Zip Code	

sabine.dedow@gmail.com

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

For further information concerning this matter, please call:

Sabine Dedow

Name of Person

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 (4/13)



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2013

SABINE DEDOW PRESIDENT 3193 OHIO ST MIAMI, FL 33133

SUBJECT: TOTAL ARKITECTURE INTERNATIONAL LLC

Ref. Number: L13000111635



We have received your document for TOTAL ARKITECTURE INTERNATIONAL LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Not sure what you or wanting to do. You list a name but you don't tell us if we are adding name, removeing name, changing name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 913A00019737

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPAN

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: Total Arkitecture International LLC The articles of organization or the application to transact business SECOND: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT $\overline{\mathbf{V}}$ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: we intend to change the name Ta Silva Joana to DA SILVA CLARA <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: DA SILVA CLARA Dated: AUG 13 2013 SABINE DEDOW

Typed or printed name of signee

Signature of a member or authorized representative of a member

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L13000111635 FILED 8:00 AM August 07, 2013 Sec. Of State Isellers

Article I

The name of the Limited Liability Company is:

TOTAL ARKITECTURE INTERNATIONAL LLC

Article II

The street address of the principal office of the Limited Liability Company is:
3193 OHIO ST
MIAMI, FL. US 33133

The mailing address of the Limited Liability Company is:

3193 OHIO ST MIAMI, FL. US 33133

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:

SOBE SERVICES LLC 2895-A COLLINS AVE MIAMI BEACH, FL. 33140

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: SOBE SERVICES LLC

Article V

The name and address of managing members/managers are:

Title: MGRM SABINE DEDOW 3193 OHIO STREET MIAMI, FL. 33133 US

Title: MGRM JOANA DA SILVA 3193 OHIO ST MIAMI, FL. 33133 US

Title: MGRM DANIELLA CAVALIERE 3193 OHIO ST MIAMI, FL. 33133 US

Article VI

The effective date for this Limited Liability Company shall be: 08/07/2013

Signature of member or an authorized representative of a member

Electronic Signature: SABINE DEDOW

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.

L13000111635 FILED 8:00 AM August 07, 2013 Sec. Of State Isellers

