

L13006112175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

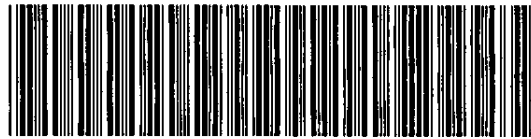
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAU INVESTMENTS, 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:

Lourdes Torres

Name of Person

Quality Corporate Services, Inc.

Firm/Company

6437 S.W. 25 Street

Address

Miami, FL 33155

City/State and Zip Code

lourdes@delaosacpa.com

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

For further information concerning this matter, please call:

Lourdes Torres

Name of Person

at ( 305 ) 527-7885

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

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 TALLAHASSEE, FLORIDA

**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:  
LAU INVESTMENTS, LLC

**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:

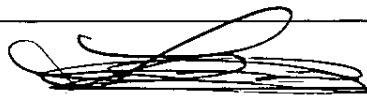
Angelica Castro - Named missing from MGRG name

Maria Angelica Castro - Correct name as it should have been submitted.

**OR**

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

Dated: \_\_\_\_\_



Signature of a member or authorized representative of a member

Incorporator

Lourdes Torres

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 AUG 14 AM 10:31

FILED

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