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| (Re | questor's Name) | |
|-------------------------|--------------------|---------------------------------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | · · · · · · · · · · · · · · · · · · · |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SEPERATE FLORIDA

SEP 1 2 2013 J. BRYAN

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Life Systems Group, 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:

Don Alcala

Name of Person

LifeSystems Group, LLC

Firm/Company

7303 124th Avenue

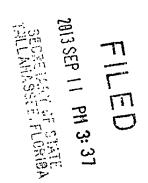
Address

Largo, Florida, 33773

City/State and Zip Code

dalcala@i-ma.com

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



For further information concerning this matter, please call:

Don Alcala

...727

548-4462 x 124

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:



□ \$30 Filing Fee & Certificate of Status

□ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (4/13)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

| FIRST Life Sy | : The nam | e of the limited liability comp | any is: | | | |
|------------------|-------------------|--|---------------------------------------|---|--|--|
| SECO | • | eles of organization or the app | lication to transact business | ETATEMENT PLANT STATEMENT | | |
| <u>(CH</u> | ECK THE APPI | ROPRIATE BOX AND COMP | LETE THE APPLICABLE S | TATEMENT % | | |
| | incorrect, and th | rrect statement. The incorrect statement, the reason the statement is corrected statement are as follows: Systems Group, LLC should be LifeSystems Group, LLC | | | | |
| | No space betv | veen the words Life and Sy | stems | | | |
| | | | | | | |
| | <u>OR</u> | | | | | |
| | | signed. The manner in which correction are as follows: | n the document was defective | ely signed and | | |
| | | | | | | |
| | | | | | | |
| Dated: | 09/1 | 10 | 20/3 | | | |
| | 50 | n Alele- ure of a member or authorized | representative of a member | _ | | |
| | Don Ale | | · · · · · · · · · · · · · · · · · · · | _ | | |
| | | Typed or printed nar | ne of signee | | | |
| | | Filing Fee: Certified Copy: | \$25.00 \$30.00 (optional) | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | |
|--|--|
| The name of the Limited Liability Company | is: |
| Life Systems Group, LLC | |
| | Liability Company, "L.L.C.," or "LLC.") |
| | |
| ARTICLE II - Address: | |
| the mailing address and street address of th | e principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 7303 124th Avenue | 7303 124th Avenue |
| Largo, Florida 33773 | Largo, Florida 33773 |
| | |
| | tegistered Agent, You must designate an individual or another the registered agent are: |
| N | ame . |
| T000 (D4)) A | |
| 7303 124th Avenue | A Alfred NO Des NOT and All N |
| | at address (P.O. Box <u>NOT</u> acceptable) |
| | lorida _F 33773 |
| Cit | y, State, and Zip |
| liability company at the place designated registered agent and agree to act in this call statutes relating to the proper and com | I to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with s registered agent as provided for in Chapter 608, F.S |

(CONTINUED)

Page 1 of 2

SECRITARY OF SINTENE SECRETARY OF CORPORATIONS 13 AM 10: 06

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| MGRM | Matthew Scussel | TOPSER 1 |
|-----------------------------------|--|--------------------|
| | 412 Timberwalk Lane | 張っ |
| | Lake Mary, Florida 32746 | 7 - 1 0 - 1 - 1 |
| AGRM | William Funk | 12,00 |
| | 1298 Snell Isle Bivd NE | 9,73 |
| | St. Petersburg, Florida 33704 | T |
| MGRM | Chris Thomas | |
| == | 2613 Cottage Loop Road | |
| | Park City, Utah 84098 | |
| | | |
| | | |
| | | |
| Use attachment if necessary) | | |
| Ose attachment if necessary) | <u>.</u> | |
| EV: Effective date, if other th | an the date of filing: (OPTION | AL) |
| fective date is listed, the date | must be specific and cannot be more than five busing | ess days |
| or 90 days after the date of fili | | • |
| | | |
| | | |

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)