

L13000142292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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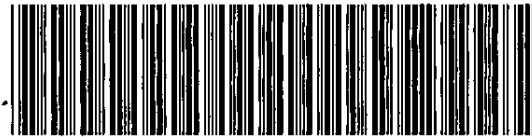
(Business Entity Name)

(Document Number)

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2013 OCT 29 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 30 2013

T. HAMPTON

L 13000142292

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Phillipo 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:

Diego Liverotti
Name of Person

Phillipo LLC
Firm/Company

5681 Pershing Ave
Address

Orlando FL 32822
City/State and Zip Code

diego.liverotti@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
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

**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.

L13000142292

FIRST: The name of the limited liability company is:

Fillipo 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:

The name of the limited liability company
"Fillipo LLC" is miss spelled. The correct
spelling is "Phillipo LLC"

OR



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

Dated: _____

Diego Liverotti

Signature of a member or authorized representative of a member

Diego Liverotti

Typed or printed name of signee

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT 29 AM 11:45

FILED

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

L13000142292
FILED 8:00 AM
October 09, 2013
Sec. Of State
ncausseau

Article I

The name of the Limited Liability Company is:

FILLIPO LLC

Article II

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

5681 PERSHING AVE
ORLANDO, FL. 32822

The mailing address of the Limited Liability Company is:

5681 PERSHING AVE
ORLANDO, FL. 32822

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:

DIEGO M LIVEROTTI
5681 PERSHING AVE
ORLANDO, FL. 32822

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: DIEGO M LIVEROTTI

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2013 OCT 29 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: MGRM
DIEGO M LIVEROTTI
5681 PERSHING AVE
ORLANDO, FL. 32822

Title: MGRM
MAURO S LIVEROTTI
5681 PERSHING AVE
ORLANDO, FL. 32822

L13000142292
FILED 8:00 AM
October 09, 2013
Sec. Of State
ncausseaux

Article VI

The effective date for this Limited Liability Company shall be:

10/08/2013

Signature of member or an authorized representative of a member

Electronic Signature: DIEGO LIVEROTTI

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.

FILED

2013 OCT 29 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA