

L13000146493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

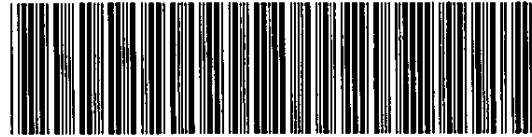
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2013 OCT 21 PM 3:29

SECRETARY OF STATE  
TALLAHASSEE, FL 32304

W. Culligan OCT 23 2013

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WATER DAMAGE SOLUTIONS, 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:

Tommy Taveras

Name of Person

Water Damage Solutions LLC

Firm/Company

601 Heritage Drive Suite 220A

Address

Jupiter FL, 33458

City/State and Zip Code

trtaveas@gmail.com

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

For further information concerning this matter, please call:

Tiffany Burns

Name of Person

at ( 800 ) 370-2942

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

FILED

2013 OCT 21 PM 3:30

ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:  
WATER DAMAGE SOLUTIONS, 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:

I wish to file a correction to the LLC name. Please correct Articles and Public

Record so the name of the LLC for Doc. NO. L13000146493 to be

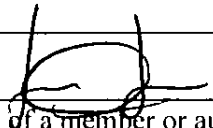
DRY MY WATER DAMAGE, LLC

**OR**



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

Dated: October 18th, 20123

 10-18-13  
Signature of a member or authorized representative of a member

Tommy Taveras - Managing Member

Typed or printed name of signee

**Filing Fee: \$25.00**

**Certified Copy: \$30.00 (optional)**

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

L13000146493  
FILED 8:00 AM  
October 17, 2013  
Sec. Of State  
bbostick

**Article I**

The name of the Limited Liability Company is:  
WATER DAMAGE SOLUTIONS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
601 HERITAGE DRIVE  
SUITE 220A  
JUPITER, FL. US 33458

The mailing address of the Limited Liability Company is:  
601 HERITAGE DRIVE  
SUITE 220A  
JUPITER, FL. US 33458

**Article III**

The purpose for which this Limited Liability Company is organized is:  
DRY OUT WATER DAMAGED PROPERTY

**Article IV**

The name and Florida street address of the registered agent is:  
TOMMY TAVERAS  
601 HERITAGE DRIVE  
SUITE 220A  
JUPITER, FL. 33458

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: TOMMY TAVERAS

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
ELVIS TAVERAS  
601 HERITAGE DRIVE SUITE 220A  
JUPITER, FL. 33458 US

Title: MGRM  
TOMMY TAVERAS  
601 HERITAGE DRIVE SUITE 220A  
JUPITER, FL. 33458 US

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bbostick

### **Article VI**

The effective date for this Limited Liability Company shall be:

10/21/2013

Signature of member or an authorized representative of a member

Electronic Signature: TOMMY TAVERAS

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.