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NOV - 6 2013

T. BROWN

COVER LETTER

TO:

Registration Section Division of Corporations

MY INBLOOM, 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:

Valentina Inbloom

Name of Person

MY INBLOOM, LLC

Firm/Company

10111 W. Sunrise Blvd #305

Address

Plantation, FL 33322

City/State and Zip Code

myinbloom@gmail.com

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

For further information concerning this matter, please call:

Valentina Inbloom

. 954

829-0431

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

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 MYII	•	The name o	f the limited liability of	comp	any is:	CAHASS	0V -4			
SECO!	<u>ND</u> :	The articles	of organization or the	e appl	ication to transact business	E, FLO	PH 3:			
<u>(CH</u>	ECK T	HE APPRO	PRIATE BOX AND CO	OMP.	LETE THE APPLICABLE S	TATE	ENT			
V	incorre	ains an incorrect statement. The incorrect statement, the reason the statement is rect, and the corrected statement are as follows: ongfully typed MY INBLOOM, LLC as one word.								
	It is no	ot: "MYINBI	LOOM, LLC".							
	There needs to be a space between 'MY' and 'INBLOOM'									
	The c	orrect name	e: "MY INBLOOM, L	LC"						
			ned. The manner in vection are as follows:		the document was defective	ly signe	d and			
Dated:	Octob			rized	2013 representative of a member	-				
			Typed or printed	d nan	e of signee					
			Filing Fee: Certified Copy	y:	\$25.00 \$30.00 (optional)					