

L13000158678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

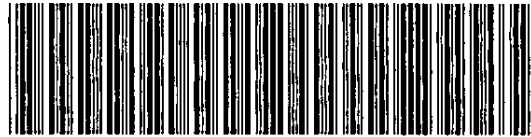
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

NOV 21 2013

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cherry Limarsine 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:

Leonel Cherry
Name of Person

Firm/Company

1520 SW 194th Ave.
Address

Pembroke Pines / FL / 33029
City/State and Zip Code

quincylcherry@yahoo.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Quincy Cherry at (954) 592-0749
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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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.

FIRST: The name of the limited liability company is:

Chery Limousine 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 current entity is "Chery Limousine LLC" which
was mistyped. The intended name for the entity is
Chery Limousine LLC" which only contains one "B". Please
make the appropriate changes. The corrected name is as
OR follows: "Chery Limousine LLC".



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

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CLERK OF STATE
TALLAHASSEE FLORIDA

Dated: _____

Leonel Chery

Signature of a member or authorized representative of a member

Leonel Chery

Typed or printed name of signee

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

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

L13000158678
FILED 8:00 AM
November 12, 2013
Sec. Of State
ncausseau

Article I

The name of the Limited Liability Company is:
CHERRY LIMOUSINE, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

The mailing address of the Limited Liability Company is:
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

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:
QUINCY L CHERY
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

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: QUINCY LEONEL CHERY

Article V

The name and address of managing members/managers are:

Title: MGR
LEONEL CHERY
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

Title: MGRM
QUINCY L CHERY
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

Title: MGRM
ELOUDE CHERY
1520 SW 194TH AVE
PEMBROKE PINES, FL. 33029

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FILED 8:00 AM
November 12, 2013
Sec. Of State
ncausseaux

Article VI

The effective date for this Limited Liability Company shall be:

11/13/2013

Signature of member or an authorized representative of a member

Electronic Signature: QUINCY L. CHERY

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.