

L13000160894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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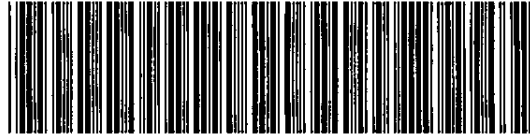
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

APR 1 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 454 NE 4TH STREET LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cynthia A. Reed, Esq.

Name of Person

Cynthia A. Reed, PA

Firm/Company

301 Yamato Road, Suite 1240

Address

Boca Raton, FL 33431

City/State and Zip Code

yemeniciler@netzero.net

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

*Please email to:
Careedesq@
comcast.net*

For further information concerning this matter, please call:

Cynthia A. Reed, Esq.

561

901-5206

Name of Person

at ()

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

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: 454 NE 4TH STREET LLC

SECOND: The Florida Document number of the limited liability company is: L13000160894

THIRD: Document to be corrected is:
ARTICLES OF ORGANIZATION, ARTICLE V

(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:

Article V. The name and address of the managing members/managers are

ALI YEMENCILER, Managing Member (MGRM); he is the sole MGRM

HAKAN ZABCI, Member (He is a Member, Not MGR, and not MGRM)

CENGIZ ZBCI, Member (He is a Member, Not MGR, and not MGRM)

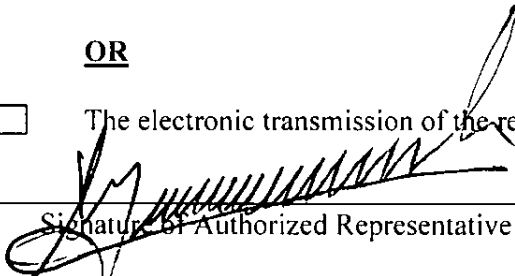
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OR

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

OR

- ☐ The electronic transmission of the record was defective.


Signature of Authorized Representative

3/17/15
Date

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