

L13000178040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

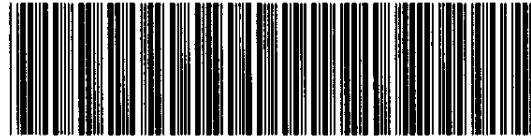
(Business Entity Name)

(Document Number)

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14 JAN 28 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5435 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:

Igor CHAPLIK
Name of Person

5435 LLC
Firm/Company

2117 NE 18 AVE
Address

WILTON MANORS FL 33305
City/State and Zip Code

ICHAPLIK@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Igor Chaplik at (3051) 720 7360
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2014

IGOR CHAPLIK
5435 LLC
2117 NE 18 AVE
WILTON MANORS, FL 33305

SUBJECT: 5435 LLC
Ref. Number: L13000178040

We have received your document for 5435 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form to change the effective date of your LLC. This document must be filed within 30 days of the filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 314A00000836

STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

FILED
14 JAN 28 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
5435 LLC

SECOND: Document to be corrected is:
Articles of Organization

(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:

Please correct the effective date
to 1/1/2014. The december 30, 2013
effective date is incorrect.

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
Date 1/19/2014

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