

L140000001879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

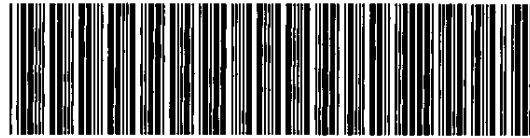
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

2014 APR - 7 AM 11:33

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D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RMS Constructors Group, 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:

Manoochehr Rahmankhah
Name of Person

RMS Constructors Group, LLC
Firm/Company

P.O. Box 133
Address

Gotha, FL 34734
City/State and Zip Code

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

For further information concerning this matter, please call:

Manoochehr Rahmankhah at (407) 3678196
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 (2/14)

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 2014 APR - 7 AM 11:33
 CLERK OF CIRCUIT COURT
 TALLAHASSEE, FLORIDA

**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: RMS Constructors Group, LLC

SECOND: The Florida Document number of the limited liability company is: L14000001879

THIRD: Document to be corrected is:
FIE/EIN Number 46-4491923

(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 FIE/EIN Number never been filed. The Above FIE Number need to be file
for RMS Constructors Group, LLC.

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

4/3/14
Date

2014 APR 7 AM 11:33
FILED
CLERK OF STATE
TALLAHASSEE FLORIDA

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