

L/4000004730

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

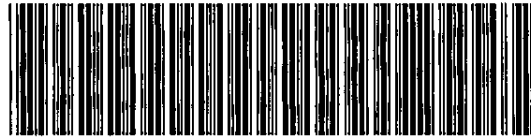
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2014 JAN 16 PM 7:01
RECEIVED
MILWAUKEE COUNTY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIZMASS Services, 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:

RICOT DANIEL
Name of Person

BIZMASS Services, LLC
Firm/Company

8920 NW 8 AVE
Address

MIAMI FL 33150
City/State and Zip Code

RICOTD25@Gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICOT Daniel at (305) 744-2356
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 (12/13)

FILED
2014 JAN 16 PM 7:01
CLERK'S OFFICE
DIVISION OF CORPORATIONS
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:

BIZMASS Services, LLC

SECOND: Document to be corrected is:

My name Ricot (P) Daniel

(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 reason why the statement is incorrect it's
because my name doesn't have a middle initial (P)
my name is: Ricot Daniel without the middle initial
(P)

OR

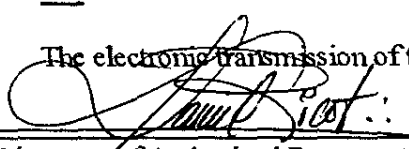


Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR



The electronic transmission of the record was defective.


Signature of Authorized Representative

1/10/2014
Date

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