

L14 000026846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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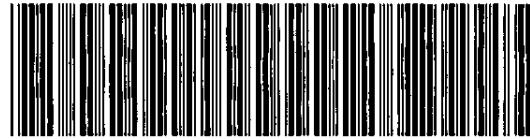
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Greens 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:

Erik Rauch PC

Name of Person

Florida Greens LLC

Firm/Company

Po Box 947809

Address

Maitland FL 32794

City/State and Zip Code

erouche@rauchchiro.com

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

For further information concerning this matter, please call:

Erik Rauch PC

Name of Person

at (407) 401-3540

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

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2014 FEB - 7 AM 10:59
SECRETARY OF STATE
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: Florida Greens LLC

SECOND: The Florida Document number of the limited liability company is: 414000026846

THIRD: Document to be corrected is:

414000026846

(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:

There was an error in typing the name in the
computer. It was submitted as Florida Greens
and it should be Florida Green Z
so just change the S to a Z.

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

4/3/14

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