

L14000038810

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SHEPPERD FLOORING, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Shepperd Flooring, 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:

**Imelda Vasquez**

Name of Person

**Legalzoom.com, Inc.**

Firm/Company

**100 W. Broadway Suite 100**

Address

**Glendale, CA 91210**

City/State and Zip Code

**jayshepperd23@gmail.com**

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

For further information concerning this matter, please call:

**Imelda Vasquez**

Name of Person

at (

**323**

Area Code

**962-8600**

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 &  
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☐ \$60 Filing Fee,  
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CR2E062 (12/13)

**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:  
**SHEPPERD FLOORING, 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:

Article II. The street address of the principal office of the Limited Liability Company was erroneously stated as:  
6704 Butch Street, Port Richie, FL 34668

Article II. The mailing address of the Limited Liability Company was erroneously stated as:  
6704 Butch Street, Port Richie, FL 34668

Article IV. The address of person(s) authorized to manage LLC was erroneously stated as:  
6704 Butch Street, Port Richie, FL 34668

Article II. The street address of the principal office of the Limited Liability Company is corrected to:  
6704 Butch Street, Port Richey, FL 34668

Article II. The mailing address of the Limited Liability Company is corrected to:  
6704 Butch Street, Port Richey, FL 34668

Article IV. The addresses for the persons authorized to manage LLC is corrected to:  
6704 Butch Street, Port Richey, FL 34668

OR

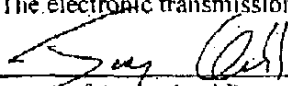


Was defectively signed. The manner in which the document was defectively signed and appropriate correction are as follows:

OR



The electronic transmission of the record was defective.

  
Signature of Authorized Representative

March 18, 2014

Date

Filing Fee: \$25.00  
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