

L14000042353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200268709702

02/18/15--01006--015 **55.00

FILED
2015 FEB 18 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 24 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OMG Carpet Care 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:

Omar Matti

Name of Person

OMG Carpet Care LLC

Firm/Company

103 San Remo Blvd.

Address

North Lauderdale, FL 33068

City/State and Zip Code

skipperomar@gmail.com

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

For further information concerning this matter, please call:

Omar Matti

954-817-3425

at (

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)

FILED
2015 FEB 18 PM 3:44
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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: OMG Carpet Care LLC

SECOND: The Florida Document number of the limited liability company is: #24

THIRD: Document to be corrected is:
Name Change (Correction)

(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 name has a typo in it. I am the owner of OMG Carpet Care LLC and my bank

account needs to match the proper information as my business information.

Please correct the spelling of my last name from Maati to Matti. I need this

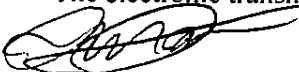
corrected on or before 2/23/2015. Thank you.

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.



02/12/2015

Signature of Authorized Representative

Date

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

FILED
2015 FEB 18 PM 3:44
CLERK OF STATE
TALLAHASSEE FLORIDA