

From:

L14000062574

5/9/2014 5:19

#665 P.001/003

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Florida Department of State  
Division of Corporations  
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H14000116313ABCS

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

From: Account Name : TOBIN & REYES, P.A.  
Account Number : I20000000155  
Phone : (561)620-0656  
Fax Number : (561)620-0657

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14 MAY -9 PM 4:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
TOBIN & REYES SERVICES LLC

Certificate of Status	0
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T. Burch MAY 18 2014

5/9/2014

From:

05/09/2014 15:11

#665 P.002/003

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tobin & Reyes 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:

Robert H. Arzonetti, Esq.

Name of Person

Tobin & Reyes, P.A.

Firm/Company

225 N.E. Mizner Boulevard, Suite 510

Address

Boca Raton, Florida 33432

City/State and Zip Code

rarzonetti@tobinreyes.com

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

For further information concerning this matter, please call:

Robert H. Arzonetti, Esq.

561

620-0656

Name of Person

at ( )

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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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: Tobin & Reyes Services LLC

SECOND: The Florida Document number of the limited liability company is: L14000062574

THIRD: Document to be corrected is: Articles of Organization

CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

[X] Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect and the corrected statement are as follows:

Article III - The name of the registered agent is listed as David S. Tobin.

The registered agent should be changed to Tobin & Reyes, P.A.

Article IV - The name, title, and address of the person authorized to manage the LLC should be changed to:

David S. Tobin, Manager, 225 N.E. Mizner Boulevard, Suite 510, Boca Raton, FL 33432

OR

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

Blank lines for correction details.

OR

[ ] The electronic transmission of the record was defective.

Signature of Authorized Representative and Date (May 8, 2014)

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