## L14000065048

| (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



500258819265

04/28/14--01024--015 \*\*25.00

SECRETARY OF STATE FALLAHASSER FLORIDA 2014 APR 28 FM 12: (

HAY = 5 2013 T. HAMPTON

## **COVER LETTER**

|   | tion Section<br>of Corporations              |                                       |   |  |  |
|---|--|---------------------------------------|---|--|--|
| SUBJECT: WI   | EFOUR LLC                                    |                                       |   |  |  |
| SOBBECT.  | Name of Limited Liability Company            |                                       |   |  |  |
| Dear Sir or Mada  | m:   |                                       |   |  |  |
| The enclosed Sta  | tement of Correction and fee(s)              | are submitted for filin               | g.  |  |  |
| Please return all   | correspondence concerning this               | matter to the followin                | g:  |  |  |
| Ana Victoria  | Naranjo                                      |                                       |   |  |  |
| <del> </del>  | Name of Person                               |                                       | -   |  |  |
| Granda & As   | sociates P.A.                                |                                       |   |  |  |
|   | Firm/Company                                 |                                       | <del>-</del>  |  |  |
| 11597 sw 14   | 9 Path                                       |                                       |   |  |  |
|   | Address                                      |                                       | <del>-</del>  |  |  |
| Miami FI 331  | 96   |                                       |   |  |  |
|   | City/State and Zip Code                      |                                       | _   |  |  |
| anavictorians   | aranjo@yahoo.com                             |                                       |   |  |  |
| E-mail addr   | ess: (to be used for future annu             | al report notification)               | -   |  |  |
|   |  |                                       |   |  |  |
| For further inform  | nation concerning this matter, p             | otease call:                          |   |  |  |
| Ana V Naran   | jo   | 786                                   | 346-1266  |  |  |
|   | Name of Person                               | Area Code                             | Daytime Telephone Number  |  |  |
| STREET/COUR<br>Registration Sect<br>Division of Corpo<br>Clifton Building<br>2661 Executive C<br>Tallahassee, Flori | orations<br>Center Circle                    |                                       | MAILING ADDRESS:<br>Registration Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, Florida 32314 |  |  |
| Enclosed is a che   | ck for the following amount:                 |                                       |   |  |  |
| ■ \$25 Filing Fee   | ☐ \$30 Filing Fee &<br>Certificate of Status | ☐ \$55 Filing Fee &<br>Certified Copy | □ \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy   |  |  |
| CR2E062 (2/14)  |  |                                       |   |  |  |

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| Pursu    | ant to s  | ection 605.0209, F.S., this document is being submitted to correct a previously filed  | documen           | t.  |  |  |  |  |
|----------|-----------|--|-------------------|-----|--|--|--|--|
|          |           | The name of the limited liability company is: WEFOUR LLC   |                   |     |  |  |  |  |
|          |           | The Florida Document number of the limited liability company is:  L14000065048  Document to be corrected is:                   |                   |     |  |  |  |  |
|          |           |  |                   |     |  |  |  |  |
|          | (C)       | HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEM  | <u>ient</u>       |     |  |  |  |  |
| <b>7</b> | corre     | nins an incorrect statement. The incorrect statement, the reason the statement is incorrect statement are as follows:          |                   | the |  |  |  |  |
|          |           | 1-PéREZ-MARANTE, MIGUEL (incorrect) Perez-Marante, Miguel (correct)  | <del> </del><br>- |     |  |  |  |  |
|          | Mgr       | Mgr 2- LóPEZ, VIVIANA (incorrect) Lopez, Viviana (COTTECT)   |                   |     |  |  |  |  |
|          | Mgr       | 3- NARANJO, ANA V (this is correct)  |                   |     |  |  |  |  |
|          |           |  | -                 |     |  |  |  |  |
|          | <u>OR</u> |  |                   |     |  |  |  |  |
|          |           | Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: |                   |     |  |  |  |  |
|          |           |  | 2014 APR          |     |  |  |  |  |
|          |           | AH   | <b>주위</b>         | 77  |  |  |  |  |
|          |           | ン):<br>の):<br>(/):   |                   | =   |  |  |  |  |
|          |           | (T)  |                   | П   |  |  |  |  |
|          |           | -17<br>-17   | ्रा<br><b>र</b> ु |     |  |  |  |  |
|          | <u>OR</u> | RIDA<br>A  | 02                |     |  |  |  |  |
|          | The e     | lectronic transmission of the record was defective.  |                   |     |  |  |  |  |
| (x)      | O(I)      | 11)-100. $4-23-2014$   |                   |     |  |  |  |  |
| Si       | gnature   | of Authorized Representative Date  | -                 |     |  |  |  |  |

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