

L14000071677

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*gfm* 5/27/14

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Accolades Associates 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:

Andreia D. Darian

Name of Person

Accolades Associates LLC

Firm/Company

4231 Erindale Dr.

Address

N. Fort Myers FL 33903

City/State and Zip Code

andreiadarian@hotmail.com

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

For further information concerning this matter, please call:

Andreia D. Darian

239

785-5851

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

**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: Accolades Associates LLC  
ACCOLADES ASSOCIATES LLC.

**SECOND:** The Florida Document number of the limited liability company is: L14000071677

**THIRD:** 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:

Reyes De Alvarez and Aryan Darian both are filed as managers incorrectly.

They are not managers Please remove them of the LLC.

The only authorized member AMBR is ANDREIA D. DARIAN


**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.



05/21/2015

Signature of Authorized Representative

Date

FILED  
MAY 27 PM 11:15  
14  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE SEVENTH JUDICIAL CIRCUIT  
IN FLORIDA

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