

L14000072971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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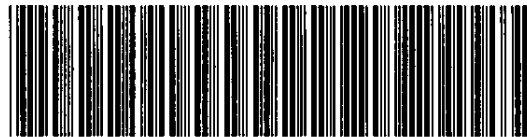
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 20 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: White, Alexander Vance II, 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:

Vance White
Name of Person

White, Vance Alexander II, LLC
Firm/Company

1103 NW Spruce Ridge Dr.
Address

Stuart, FL 34994
City/State and Zip Code

Uaw135@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vance A. White at (772) 260-5900
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

**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: White, Alexander Vance II, LLC.

SECOND: The Florida Document number of the limited liability company is: L14000072971

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:

Transposed Vance & Alexander

Correct Name

White, Vance Alexander II, LLC.

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.

Vance Alexander White II 5/8/14
Signature of Authorized Representative Date

2014 MAY 12 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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