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## **COVER LETTER**

	stration Section ion of Corporations			
SUBJECT:	U.S. International Laundry	/ Services,		
Sebuter		Name of Limited Liab	pility Company	<del></del>
Dear Sir or Ma	adam:			
The enclosed	Statement of Correction and fee(s	) are submitted for filin	g.	
Please return a	all correspondence concerning this	s matter to the followin	g:	
Ronald C.	Jansen, Jr			
	Name of Person		_	
	Firm/Company		_	
4814 Ston	eridge Trail			
	Address		_	
Sarasota,	FL 34232			
	City/State and Zip Code		<del>-</del>	
rjansenjr@	comcast.net			
E-mail a	ddress: (to be used for future annu	ual report notification)	_	। 27वां
For further inf	formation concerning this matter,	please call:		
Ronald C.	Jansen, Jr	941	809-6377	- 2 F
	Name of Person	Area Code	Daytime Telephone Number	
Registration S Division of Co Clifton Buildin	orporations ng ce Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	1: 10 1: 10
Enclosed is a	check for the following amount	:		
□ \$25 Filing i	Fee \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (2/1	4)			

## 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. U.S. International Laundry Services, The name of the limited liability company is FIRST: L.L.C. The Florida Document number of the limited liability company is: L14000080270 **SECOND:** THIRD: Document to be corrected is: Electronic Articles of Organization for Florida Limited Liability Company (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: Incorrect: Name and address of person authorized to manage LLC spelling error - George L. Reonda - Last name spelled incorrectly Corrected Statement: George L. Rionda 2338 N.W. 193rd Avenue, Pembroke Pines, FL 33029 <u>OR</u> 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. 5/28/2014 Signature of Authorized Representative Date Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)