## L14 0000 8544F

(Requ	uestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP		MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Special Instructions to Fi	ling Officer:	·		





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JUN 09 2015 J SHIVERS



May 21, 2015

MARGARET SMITH 5500 MILITARY TRAIL #22-181 JUPITER, FL 33458

SUBJECT: TARGET MARKETING SPECIALISTS, LLC

Ref. Number: L14000085448

We have received your document for TARGET MARKETING SPECIALISTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 615A00010753

## **COVER LETTER**

TO: Registration Division of	Section Corporations		,	
SUBJECT: Targe	et Marketing Speciali	sts, LLC		
	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Statem	ent of Correction and fee(s)	) are submitted for filin	ng.	
Please return all corr	espondence concerning this	s matter to the followin	g:	
Margaret Smith				
	Name of Person		_	
Target Marketin	ng Specialists, LLC			
	Firm/Company		_	
5500 Military Tr	ail #22-181			
	Address		_	
Jupiter, FL 334	58			
	City/State and Zip Code		_	
_	rketing@gmail.com			
E-mail address	(to be used for future annu	ial report notification)	_	
For further informati	ion concerning this matter,	please call:		
Margaret Smith	ı	561	<b>469-8640</b>	
Na	me of Person	at ( Area Code	Daytime Telephone Number	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	tions ter Circle		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)				

## 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. The name of the limited liability company is:\_\_\_\_ FIRST: The Florida Document number of the limited liability company is: L14000085448 SECOND: THIRD: Document to be corrected is: Registered Agent Address (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: Address for principle agent should not be the same as principle address and mailing address. The correct address for registered agent is 187 Evergrene Parkway Palm Beach Gardens, FL 33410 <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. 5/30/2015 Date Signature of Authorized Representative

> Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)