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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GFB TAX SERVICE LLC

Account Number: I20120000047 : (754)246-6160 Fax Number : (954)510-2072

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TNC GLOBAL LLC

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\$25.00

JUN 2 3 2014

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COVER LETTER

	stration Section ion of Corporations		
	TNC GLOBAL LLC		
SUBJECT: _	Name	of Limited Liab	pility Company
Dear Sir or M	adam:		
The enclosed	Statement of Correction and fee(s) are su	abmitted for filin	g.
Please return a	ill correspondence concerning this matte	er to the followin	g:
GASTON	F BELEN		
	Name of Person		_
GFB TAX	SERVICE LLC		مد. مو م
	Firm/Company		- 2
6303 BLU	E LAGOON DRIVE SUITE 400)	:
	Address	· · · · · · · · · · · · · · · · · · ·	_
MIAMI, FL	. 33126		
	City/State and Zip Code		_
GASTON	BELEN@GFBTAXSERVICE.C	ОМ	
E-mail a	ddress: (to be used for future annual rep	ort notification)	_
For further in	ormation concerning this matter, please	call:	
GASTON	BELEN	754	246-6160
	Name of Person	_at (Area Code	Daytime Telephone Number
Registration S Division of Co Clifton Buildi	orporations ng ve Center 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		55 Filing Fee & Tertified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy
CR2E062 (2/	14)		

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STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

FIRS		The name of the limited liability company	•	•		
SEC	OND:	The Florida Document number of the limited liability company is: L14000085592				
THI	RD:	Document to be corrected is:				
	(CH	IECK THE APPROPRIATE BOX AND CO	MPLETE THE APPLICABLE	E STATEMENT		
7		ins an incorrect statement. The incorrect stated statement are as follows:	ntement, the reason the statem	nent is incorrect, and the		
	We m	nade a misspelling mistake in the last na	ame of MARIA I CASTELL	I.		
	The c	correct last name is CATELLI				
	OR					
		efectively signed. The manner in which the tion are as follows:	document was defectively si	igned and the appropri		
	<u>OR</u>					
	The	estronic transmission of the record was def		20 8		
S	ignature	of Amilor Zed Representative	06-20-2014 Date	<u> </u>		
		Filing Foot	\$ 25 .00	* +#**		

Filing Fee: Certified Copy:

\$30.00 (optional)