## 14000092549

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ADAM WESSLEY 2829 PEPPER RIDGE WICHITA, KS 67205

SUBJECT: TRIPOD VENTURES BEACH BLVD LLC

Ref. Number: L14000092549

We have received your document for TRIPOD VENTURES BEACH BLVD 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 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.

Tammi Cline Regulatory Specialist II

Letter Number: 514A00020142

2014 DCT -6 PM 1: 28

## **COVER LETTER**

TO: Registration Division of	n Section Corporations			
Tripo	od Ventures Beach Bl	vd LLC		
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Statem	nent of Correction and fee(s)	are submitted for filin	ng.	
Please return all corr	respondence concerning this	matter to the followin	g:	
Adam Wessley	,			
	Name of Person		_	
Tripod Venture	s Beach Blvd LLC			
	Firm/Company		_	
2829 Pepper R	lidge			
	Address		<b></b>	
Wichita, KS 67	205			
****	City/State and Zip Code		<del>-</del>	
accounting@tri	ipodusa.com			
E-mail address	: (to be used for future annu	al report notification)	_	
For further informat	ion concerning this matter, p	olease cail:		
Kyle Gerstner		316	209-5296	
Na	ume 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	
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: L14000092549 SECOND: 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: Remove Kyle Gerstner as Manager. Adam Wessley is the Sole Manager for the LLC OR 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. ignature of Authorized Representative

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)