

L14000095301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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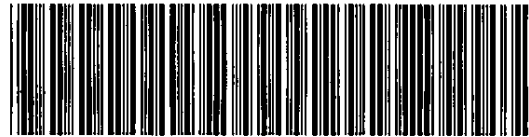
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JUN 24 2014

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BVO WRAPPING, 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:

JOAO CARLOS SANTOS FILHO

Name of Person

BVO WRAPPING, LLC

Firm/Company

7362 FUTURES DR. STE 2

Address

ORLANDO, FLORIDA 32819

City/State and Zip Code

roberta@opicebluminterconsulting.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE ROBERTO OPICE BLUM

Name of Person

407

Area Code

6742051

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)

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**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: BVO WRAPPING, LLC

SECOND: The Florida Document number of the limited liability company is: L14000095301

THIRD: Document to be corrected is:
Article V - the second AMBR name should be correct (filed name error)

(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:

The second company name authorized to manage the LLC was filed wrong.

The second AMBR name authorized to manage the LLC should be as follow:

MM ENTERPRISES FL GROUP, 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.


Signature of Authorized Representative

06/17/14
Date

CLERK OF STATE
TALLAHASSEE, FLORIDA

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