

L14000096371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

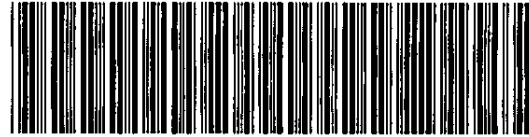
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 JUL -8 AM 11:49
TALLAHASSEE, FLORIDA

JUL 09 2014

D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2014

CHRISTOPHER WENZEL
2280 GASLIGHT STREET
PORT ST LUCIE, FL 34952

SUBJECT: PINEAPPLE TRIM LLC
Ref. Number: L14000096371

We have received your document for PINEAPPLE TRIM LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 814A00013801

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pineapple Trim 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:

Christopher Wenzel
Name of Person

Pineapple Trim LLC
Firm/Company

2280 Gaslight Street
Address

Port Saint Lucie / FL / 34952
City/State and Zip Code

CW.Cabinet.Jax@Gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Wenzel at (904) 228-5789
Name 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

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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: Pineapple Trim LLC

SECOND: The Florida Document number of the limited liability company is: ~~482205~~ L14000096371

THIRD: Document to be corrected is:

Article IV

(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:

Article IV is incorrect it should state Christopher D.
Wenzel is President of Pineapple Trim LLC.
I didnt fully understand I Christopher Wenzel was
Trying to make Kathryn stay the registered Agent of pineapple Trim 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.

Chris Wenzel
Signature of Authorized Representative

6/18/14
Date

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CLERK OF STATE
TALLAHASSEE FLORIDA

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

I hereby am familiar with and accept
the duties and responsibilities as registered
agent for Pineapple trim LLC

Kathryn Dwyer

7-2-14

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CLERK OF DISTRICT COURT
SAN JUAN COUNTY, FLORIDA