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(Business Entity Name)					
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J. HARRIS

CCRPORATE When you need ACCESS to the world ACCESS,

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

		1101 251 01 000 (520 1 000) (550) 222 2000 51 (550) 222 1500						
WALK IN								
		PICK UP: 8-5-14						
		CERTIFIED COPY						
	X	РНОТОСОРУ						
		CUS						
	×	FILING Correction						
1.		Phantom USA, LL C (CORPORATE NAME AND DOCUMENT #)						
2.		(CORPORATE NAME AND DOCUMENT #)						
3.	-	(CORPORATE NAME AND DOCUMENT #)						
4.	-	(CORPORATE NAME AND DOCUMENT #)						
5.	-							
		(CORPORATE NAME AND DOCUMENT #)						
6.	-	(CORPORATE NAME AND DOCUMENT #)						
SPI	ECIAI	L INSTRUCTIONS:						

COVER LETTER

	tration Section ion of Corporations				
SUBJECT:	Phantom USA, LLC				
20201.	Name of Limited Liability Company				
Dear Sir or Ma	dam:				
The enclosed	Statement of Correction and fee(s	are submitted for filir	ng.		
Please return a	Il correspondence concerning thi	s matter to the followin	g:		
Susan Sau	nders				
	Name of Person		· ·		
Sharit, Bur	n & Chilton, P.A.				
***************************************	Firm/Company				
P.O. Box 9	498				
	Address		nya.		
Winter Hav	ren, FL 33883-9498				
	City/State and Zip Code		_		
doug@arta	ttackfx.com				
E-mail ac	dress: (to be used for future annu	ual report notification)	_		
For further info	rmation concerning this matter, (please call:			
Susan Sau	nders	863	293-5000		
	Name of Person	Area Code	Daytime Telephone Number		
STREET/COU Registration Se Division of Co- Clifton Buildin 2661 Executive Tallahassee, Fl	porations g Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a c	heck for the following amount:				
• \$25 Filing F	ce \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy		
CR2E062 (2/14	1				

the chief.

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant	to section 605.0209. U.S. this document is being submitted to correct a previously filed document	JA1					
FIRST:	The name of the limited liability company is: Phantom USA, LLC						
SECONI	The Florida Document number of the limited liability ompany is:						
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:						
T}	The name of the authorized representative and registered agent was spelled						
	incorrectly. The correct spelling is: Douglas M. Wilson						
	The state of the s						
<u>01</u>	<u></u>						
	as defectively signed. The manner in which the document was defectively signed and the approprection are as follows:	priate					
<u>of</u>	<u>₹</u>	14	SIAIG JS				
	e electronic transmission of the record was defective.	AUG -	SION S				
	Auc 5/14	2					
Signat	are of Authorized Representative Date	=					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	11:119	8/41 DES				