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S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	• •
SUBJECT: Vapor Viz & Com, Name of Limited Lie	Poing ability Company
Dear Sir or Madam:	
The enclosed Statement of Correction and fee(s) are submitted for fili	ing.
Please return all correspondence concerning this matter to the following	ng:
Charlas R. Dehling Name of Person	
Vapor Vix & Company Firm/Company	TALLAN
1701 The Greens Way #811	
Jax Bch, FL 32250 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:	
Charles R. Dehling at 904 Name of Person Area Cod	710-3756 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:	
\$30 Filing Fee & Certificate of Status Certified Copy	Section Filing Fee, Certificate of Status & Certified Copy

CR2E062 (2/14)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursua	ant to section 605.0209, F.S., this document is being submitted to correct a previously filed of				
FIRST	T: The name of the limited liability company is: Vapor Viz & Company	,uc			
<u>SECO</u>	The Florida Document number of the limited liability company is: <u>L1400012</u>	0961			
THIRD: Document to be corrected is:					
	Detail by Registered Agent Name				
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEM	<u>ENT</u>			
X	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
	incorrect Florida LLC name - Vapor Viz & Company	1			
	incorrect due to typo Correct Florida LLC name - Vapor Vix & Company	!			
	Correct Florida LLC name - Vapor Vix & Company	,			
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the correction are as follows:	ie approp	oriate		
		77			
	등 기계	= -	77		
		175 175	77		
	<u>OR</u>	i Çi			
	The electronic transmission of the record was defective.				
_Cl	hanles R. Delia: 8/6/14				
	gnature of Authorized Representative Date				

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)