

L14000124046

(Requestor's Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 28 2014
T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K2 Visionaries, 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:

Katherine Lemieux ^{OR} Kate Campbell
Name of Person (SAA)
K2 Visionaries ←
Firm/Company
5644 Monte Carlo Lane
Address
Margate, FL 33068
City/State and Zip Code
2425 E. Commercial Blvd.
Ste. 400
Fort Lauderdale, FL 33308
Dr. Kate @ Bayviewtherapy.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Katie Lemieux at (954) 401-9011
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2014

KATE CAMPBELL
2425 E COMMERCIAL BLVD
SUITE 400
FORT LAUDERDALE, FL 33308

SUBJECT: K2 VISIONAIRES, LLC
Ref. Number: L14000124046

We have received your document for K2 VISIONAIRES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 414A00017489

**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: _____

K2 Visionaires, LLC

SECOND: The Florida Document number of the limited liability company is: L14000124046

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:

spelled incorrectly to be
spelled:
K2 Visionaires, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 AUG 28 PM 1:45

FILED

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]
Signature of Authorized Representative

8/8/14
Date

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