## L14000 177318

(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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SECREJARY OF STATE
TALLAMASSEE, FLORIDA

Florida



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2014

JOSE SEGURA 11096 BRANDYWINE LAKE WAY BOYNTON BEACH, FL 33473

SUBJECT: SEGURA AND GALEANO, LLC

Ref. Number: L14000137318

We have received your document for SEGURA AND GALEANO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Letter Number: 314A00019554

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org



## **COVER LETTER**

TO: Registration Division of	Section Corporations		**
SEGl suвјест:	JRA AND GALEANO	, LLC	
		Name of Limited Liab	ility Company
Dear Sir or Madam:			
The enclosed Stateme	ent of Correction and fee(s)	are submitted for filing	<b>.</b>
Please return all corre	espondence concerning this	matter to the following	<b>3</b> :
Jose Segura			
	Name of Person		-
	Firm/Company	<del></del>	-
11096 Brandyw			
	Address		-
Boynton Beach	ı, FL 33473		
	City/State and Zip Code		-
jose.seguram@	gmail.com		
E-mail address	: (to be used for future annu-	al report notification)	-
For further informati	on concerning this matter, p	lease call:	
Jose Segura		954 at (	328-3953
Na	me of Person	Area Code	Daytime Telephone Number
STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, Florida	tions ter Circle		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)			

## STATEMENT OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		eing submitted to correct a previously filed do sing SEGURA AND GALEANO, LLC
<u>ST</u> :	The name of the milited hability compa	ny is:
COND:	The Florida Document number of the li	mited liability company is: L14000137318
IRD:	Document to be corrected is:	
	Articles of Organization	
<u>(C</u>	HECK THE APPROPRIATE BOX AND C	COMPLETE THE APPLICABLE STATEMEN
	ains an incorrect statement. The incorrect cted statement are as follows:	statement, the reason the statement is incorre
Inco	rrect Statement: SEGURA AND GALE	ANO, LLC
Rea	son: For trucking business, the DOT re	equires the legal name not the "DBA".
l wa	nt the legal name to be the name of m	y company which is transsegura
Corr	ect Statement: transsegura, LLC	
<u>OR</u>		
	defectively signed. The manner in which to	the document was defectively signed and the
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OR		94 S
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Thag	lectronic transmission of the record was d	efective.
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Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)