#L14000/6/200

(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
,		
	Office Use On	dv



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October 29, 2014

MELISSA P. LANZA, P.A. LISA LANZA 104 CRANDON BLVD, STE. 420 KEY BISCAYNE, FL 33149

SUBJECT: BOMI INVESTMENTS, LLC

Ref. Number: L14000161200

We have received your document for BOMI INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 414A00023198

11/14 Corrected form enclosed

.

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT:	Bomi		Iments, LLC	
		Name of Limited Lial	bility Company	
Dear Sir or Madam:				
The enclosed Statem	ent of Correction and fee(s)) are submitted for filin	g.	
Please return all corr	espondence concerning this	matter to the followin	g:	
Lis	Sq Lanza,	Esq.		
	Name of Person Sa . Lai Firm/Company		- -	
104	Crandon E	Blud., Su	te 420	
- Rey	BISCA IN City/State and Zip Code	fl 331	49	
llai	NZA law OQ (s1.10m		
For further informati	on concerning this matter, p	please call;		
LISA	Lanza	at (305	361-0997	
Na	me of Person	Area Code	Daytime Telephone Number	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er 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 FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursua	ant to se	ection 605.0209, F.S., this document is being submitted to correct a previously filed document.	
<u>FIRS'</u>	<u>r</u> :	The name of the limited liability company is: Bomi Investments, LLC	
SECO	OND:	The Florida Document number of the limited liability company is: 2/4000/6/200	
THIR	<u>.D</u> :	Document to be corrected is:	
		ARTICLES OF ORGANIZATION	
	<u>(C</u> 1	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
A	correc	ins an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the statement are as follows:	
	لل	morrect Manager stated. Should be!	
		Christian tell	
		5445 Collins Avenue, Suite CU-15	
		Miami Beach, A 33140	
	<u>OR</u>		
		defectively signed. The manner in which the document was defectively signed and the appropriate	
	correc	tion are as follows:	
	<u></u>	The second secon	
		25 T	ţ
		To F	ميسر رسيا
	<u>OR</u>	2 PH 4: 45 SSEE, FLORIDA	
	The e	ectronic transmission of the record was defective.	
	//	11/7/14	
Si	gnature	of Authorized Representative Date	
		Filing Fee: \$25.00	
		Certified Copy: \$30.00 (optional)	