

L 14000192419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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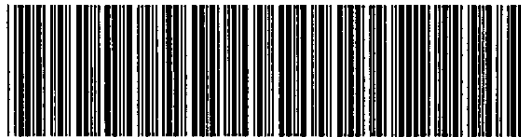
(Business Entity Name)

(Document Number)

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LLC  
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3-27-15  
DC

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Limoge Construction, 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:

Geoffrey A. Limoge

Name of Person

Limoge Construction, LLC

Firm/Company

~~171 Kristi Drive~~ 874 Wildwood Drive

Address

~~Indian Harbour Beach, FL 32937~~ Melbourne, FL 32940

City/State and Zip Code

glimoge@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael S. Lawley, CPA

at ( 321 )

728-1040

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

**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: Limoge Construction, LLC

**SECOND:** The Florida Document number of the limited liability company is: L14000192419

**THIRD:** Document to be corrected is:  
Electronic 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:

The registered agent's name, Geoffery A. Limoge, is misspelled.

The correct spelling of the registered agent's name is Geoffrey A. Limoge.

The manager's name, Geoffery A. Limoge, is misspelled.

The correct spelling is Geoffrey A. Limoge.

**OR**

- ☒ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

The electronic signature, Geoffery A. Limoge, is misspelled.

The correct spelling of the electronic signature is Geoffrey A. Limoge.

**OR**

- ☐ The electronic transmission of the record was defective.

  
Signature of Authorized Representative

3/2/15  
Date

FILED  
15 MAR -6 PM 2:11  
ALLAHBACH STATE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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