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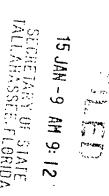
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	٠.	COVERLE	LILER
TO: Registratio Division of	n Section Corporations	* <b>*</b>	
CITE SUBJECT:	RUSOLUTION PERFE	ECT CLEANING	OF BREVARD COUNTY, FL
50 <b>5</b> 500001,		Name of Limited Liab	pility Company
Dear Sir or Madam:			
The enclosed Staten	nent of Correction and fee(s)	are submitted for filin	g.
Please return all cor	respondence concerning this	s matter to the following	g:
MATTHEW J. I	MONAGHAN, ESQ.		
	Name of Person		_
CANTWELL &	GOLDMAN, P.A.		
	Firm/Company		
96 WILLARD S	STREET, STE. 302		
	Address	······································	<del>-</del>
COCOA, FL 32	2922		
	City/State and Zip Code		_
1SJSMITH@B	ELLSOUTH.NET		
E-mail address	s: (to be used for future annu	al report notification)	-
For further informat	ion concerning this matter, p	olease call:	
STUART J. SM	1ITH	321	292-9753
Nŧ	nme 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

Pursu	ant to se	ection 605.0209, F.S., this document is being su	bmitted to correct a previou	isly filed	docui	ment.			
<u>FIRST</u> :		The name of the limited liability company is:	CITRUSOLUTION PERF	ECT CL	EAN	<b>N</b> -			
		OF BREVARD COUNTY, FLORIDA, LLC.							
SECO	OND:	The Florida Document number of the limited	liability company is: L1400	0019487	'1				
THIE	<u>ED</u> :	Document to be corrected is:							
		ARTICLES OF ORGANIZATION FILED ON DECEMBER 23, 2014.							
	<u>(CF</u>	HECK THE APPROPRIATE BOX AND COMP	LETE THE APPLICABLE :	STATEM	<u>IENT</u>				
<u>/</u>		ins an incorrect statement. The incorrect stateneted statement are as follows:	nent, the reason the statemen	nt is inco	rrect,	and the			
	Incor	rect Statement: CitruSolution Perfect Clea	ning of Brevard County, F	lorida, l	LC				
	Corre	ect Statement: CitruSolution Carpet Cleanir	g of Brevard County, Flo	rida, LL(	C				
	Incor	prrect Statement: 2023 N. Atlantic, #203 , Cocoa, Florida 32931							
	Corre	orrect Statement: 2023 N. Atlantic, #208, Cocoa, Florida 32931							
	<u>OR</u>								
		as defectively signed. The manner in which the document was defectively signed and the appropriate prrection are as follows:							
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	<u>OR</u>			ATE RIDA	12				
	The el	lectronic transmission of the record was defecti-	ve.						
البجيا	Ou	atthe	1/7/15						
Si	gnature	of Authorized Representative	Date		-				

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)