## L500022589

(Re	equestor's Name)					
(Address)						
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PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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MAR 1 8 2015 S. YOUNG

## 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.

ursua	111 10/30	oction 605.0207, 1.5., this document is being submitted to correct a previously fried document.					
FIRST	<u>:</u> :	The name of the limited liability company is:					
		H.U. A.C Filtration UC					
SECO.	ND:	The Florida Document number of the limited liability company is: <u>L1500002</u> 3587					
<u>THIRI</u>	Document to be corrected is:  Aticle Organisation						
	<u>(Cl</u>	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT					
X		ins an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the statement are as follows:					
-	<u>:</u> [	HC MGRIUREAA, BLADIMIR . INCORRECT					
-	Ti	He MGR: URENA BLASDIMIR: CORRECT					
	1	ney put the incorrect name.					
	OR	2 0					
		lefectively signed. The manner in which the document was defectively signed and the appropriate stion are as follows:					
<b>-</b>	<u>OR</u>						
21	The el	ectronic transmission of the record was defective.					
Sig	nature	of Authorized Representative  Date					
_							

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)

## **COVER LETTER**

Division of	Section Corporations			
SUBJECT:	U. A.C T	Name of Limited Liab	oility Company	<u>_</u>
Dear Sir or Madam:				
The enclosed Stateme	ent of Correction and fee(s)	are submitted for filin	g.	
Please return all corre	espondence concerning this	matter to the following	g:	
Blasdi	Name of Person	Jrena	_	
H.V. A.C	Filtrat Firm/Company	ion LL	<u>C</u>	
12704	SW 44 te	rr Mia	mi, FL 331	15
Blady E	City/State and Zip Code  Semuto  (to be used for future annual)	al report notification)	_	FILED TOWNSHIP
Blodini	on concerning this matter, p	_	) 896-6972 Daytime Telephone Number	- 0000 - 00000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 00000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 0000 - 00000 - 0000 - 0000
STREET/COURIED Registration Section Division of Corporati 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)