

15000046419

Fax Services

185-617-6383

Division of Corporations

D3

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ASLAN TAX SERVICES INC
Account Number : I20140000082
Phone : (305)644-9144
Fax Number : (786)477-5802

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: elvalve2@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
E.G. TELECOMMUNICATIONS & TECHNOLOGY LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E.G. TELECOMUNICATIONS & TECHNOLOGY 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:

IRMA SERNA

Name of Person

ASLAN TAX SERVICES INC

Firm/Company

782 SW 18TH AVE

Address

MIAMI, FL 33135

City/State and Zip Code

EVALVEZ@GMAIL.COM

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

For further information concerning this matter, please call:

IRMA SERNA

at **305**

644-9144

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: _____
E.G. TELECOMMUNICATIONS & TECHNOLOGY LLC

SECOND: The Florida Document number of the limited liability company is: L15000046419

THIRD: Document to be corrected is:
L15000046419

(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:

E.G. TELECOMMUNICATIONS & TECHNOLOGY LLC

OR

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

OR

☐ The electronic transmission of the record was defective.

X *[Signature]* 06/22/2015
Signature of Authorized Representative Date

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TALLAHASSEE FLORIDA

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