L15000141655

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AUG 0 3 2015 S MASON

COVER LETTER

TO:

TO: Registration Division of	Section Corporations			
SUBJECT: CH V	Vaste Services			
SOBJECT.	Name of Limited Liability 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 following	g:	
Freddy Mauricie	o Chavez			
	Name of Person		_	
CH Waste Serv	rices			
	Firm/Company		_	
444 Brickell Ave	e suite 807			
	Address		_	
Miami FL, 3313	31			
	City/State and Zip Code		-	
mchavez@chw	asteservices.com			
E-mail address	(to be used for future annu	al report notification)	_	
For further information concerning this matter, please call:				
Freddy Mauricion	o Chavez	786	7622641	
Na	me 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	
CR2E062 (2/14)				

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. The name of the limited liability company is:_ **FIRST**: The Florida Document number of the limited liability company is: L15000069655 SECOND: THIRD: Document to be corrected is: The tittle name (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 name of the registered agent and the name of the authorized member, Maoricio Chavez has been misspelled, please correct name as spelling should be: Freddy Mauricio Chavez <u>OR</u> 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. 7/27/2015 Signature of Authorized Representative Date Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)