

LIS 0000 81105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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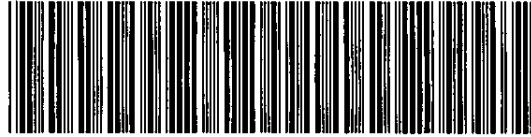
(Business Entity Name)

(Document Number)

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2015 MAY 20 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Y&M Seashore 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:

YOSVANY PINO PAZ  
Name of Person

\_\_\_\_\_  
Firm/Company

220NW 22nd CT  
Address

Cape Coral, FL 33993  
City/State and Zip Code

pino.yosvany@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YOSVANY PINO PAZ at (239) 258 7701  
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: Y&M Seashore LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000081105

**THIRD:** Document to be corrected is:  
Article III and IV

**(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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**OR**

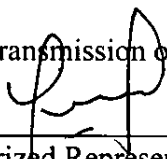
Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Defectively signed as YOSVANY PAZ Sr (Article III)  
YOSVANY PIND Sr (Article IV)

Appropriate correction are: YOSVANY PIND PAZ (Article III)  
YOSVANY PIND PAZ (Article IV)

**OR**

The electronic transmission of the record was defective.



05/18/15

Signature of Authorized Representative

Date

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