

LF5000115673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

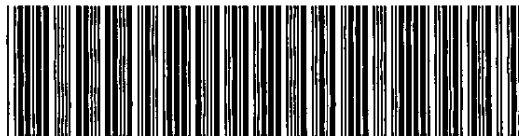
(Business Entity Name)

(Document Number)

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AUG 20 2015  
J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 AUG 20 PM 2: 59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 23, 2015

LUIS ALBERTO HERNANDEZ  
6956 TOWERING SPRUCE DR  
RIVERVIEW, FL 33578

SUBJECT: ACA ME QUEDO BAR LLC  
Ref. Number: L15000115673

We have received your document for ACA ME QUEDO BAR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 615A0001

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ACA ME QUEDO BAR 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:

Luis Alberto Hernandez

Name of Person

ACA ME QUEDO BAR LLC

Firm/Company

6956 Towering Spruce Dr.

Address

Riverview, FL 33578

City/State and Zip Code

ACAMEQUEDO BAR@yahoo.com

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

For further information concerning this matter, please call:

Luis Hernandez

Name of Person

at ( 858 )

Area Code

922-9345

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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: \_\_\_\_\_

ACAME QUEDO BAR LLC

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

**THIRD:** Document to be corrected is: \_\_\_\_\_

L15000115673

**(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 incorrect statement is in the Articles  
of Organization, Article V, effective date  
09/30/2015. Correct statement is effective  
date 08/07/2015.

**OR**

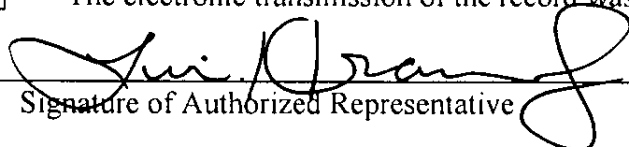
- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

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

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**OR**

- ☐ The electronic transmission of the record was defective.

  
Signature of Authorized Representative

August 5, 2015  
Date

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