

L15000 184 966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

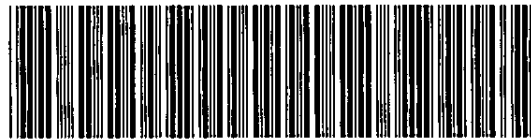
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 07 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRIO OIL & GAS, 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:

Kevork Adanas

Name of Person

Kevork Adanas, P.C.

Firm/Company

2115 Linwood Avenue Suite 315

Address

Fort Lee, NJ 07024

City/State and Zip Code

george@adanaslaw.com

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

For further information concerning this matter, please call:

Kevork Adanas

Name of Person

at (**201**) **592-9190**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 DEC -7 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 25, 2015

KEVORK ADANAS
KEVORK ADANAS, P.C.
2115 LINWOOD AVENUE SUITE 315
FORT LEE, NJ 07024

SUBJECT: TRIO OIL & GAS, LLC
Ref. Number: L15000184966

We have received your document for TRIO OIL & GAS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 015A00024838

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2015 DEC -7 PM 3:45

FILED

**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: TRIO OIL & GAS, LLC

SECOND: The Florida Document number of the limited liability company is: L15000184966

THIRD: Document to be corrected is: Electronic Articles of Organization

(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 first name of the Registered Agent and Member Delores Angeles was spelled incorrectly. The correct spelling of the name of the Registered Agent and Member Delores Angeles is Dolores Angeles.

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.

 11/30/2015
Signature of Authorized Representative Date

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

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

DEC - 7 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA