

LF5000207684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

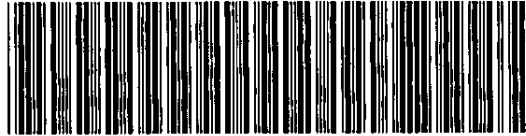
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STONISULT STAFF
TALLAHASSEE, FLORIDA

FEB 18 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 9, 2016

ROBERT WINSLER
6000 CATTLERIDGE DRIVE STE 306
SARASOTA, FL 34232

SUBJECT: ARMENTROUT CHAU & ASSOCIATES, PLLC
Ref. Number: L15000207684

We have received your document for ARMENTROUT CHAU & ASSOCIATES, PLLC and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 116A00002771

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Armentrout Chau & Associates, PLLC
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:

Robert Winsler

Name of Person

Armentrout Chau & Associates

Firm/Company

6000 Cattleridge Dr., Suite 306

Address

Sarasota, FL 34232

City/State and Zip Code

lchau@cpasrq.com

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

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16 FEB -8 PM 5:09
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robert Winsler

Name of Person

at (941) 650-8423

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: _____

Armentrout Chan & Associates, PLLC

SECOND: The Florida Document number of the limited liability company is: L15000207684

THIRD: Document to be corrected is: 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:

Incorrect Statement: As Member - The Commercial Group, Inc.

Reason: Became inaccurate due to changed circumstances. (LLC tax decision)

Corrected Statement: Replace Member, The Commercial Group, Inc. with
Member Robert J. Winsler, Jr., 6000 Cattleridge Dr.,
Suite 306, Sarasota, FL 34232

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.


Signature of Authorized Representative

2/16/16
Date

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TALLAHASSEE, FLORIDA

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)