

L160000 11225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

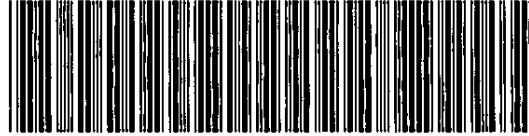
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300287511283

2016 JUL -5 AM 8:01
TALCAHASSEE, FLORIDA

07/06/16--01007--025 **25.00

2016 JUL -5 P 12:20
SECRETARY OF STATE
TALCAHASSEE, FLORIDA

FILED

JUN 06 2016
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Independent Trade Technicians Association, 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:

Jaime Lapides

Name of Person

Independent Trade Technicians Association, LLC.

Firm/Company

8567 Coral Way, Suite 204

Address

Miami, FL 33155

City/State and Zip Code

candidcameo@aol.com

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

For further information concerning this matter, please call:

Jaime Lapides

Name of Person

954

Area Code

554-9547

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 (9/15)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL -5 P 12: 21

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: Independent Trade Technicians Association, LLC.

SECOND: The Florida Document number of the limited liability company is: L16000011225

THIRD: Document to be corrected is: L16000011225

(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:

Registered agent name was typed incorrectly (Jamie Lapides)

Correct registered agent name is: Jaime Lapides

OR

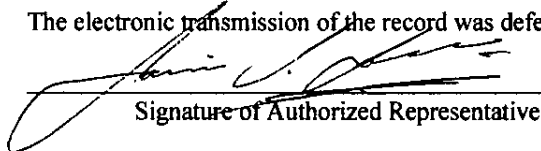
- ☒ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Registered agent signature was typed incorrectly (Jamie Lapides)

Correct registered agent signature is: Jaime Lapides

OR

- ☐ The electronic transmission of the record was defective.


Signature of Authorized Representative

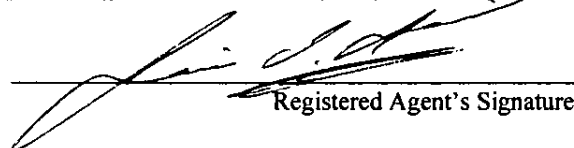
Date

6-22-2016

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)