

2160000 27078

(Requestor's Name)

(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2016

THOMAS CONKLIN
442 S TAMIAMI TRAIL
OSPREY, FL 34229

SUBJECT: FIORA ROSA FOOD COMPANY LLC
Ref. Number: L16000027078

We have received your document for FIORA ROSA FOOD COMPANY 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):

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

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 816A00004782

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORA ROSA FOOD COMPANY LLC
Name of Corporation

DOCUMENT NUMBER: LI6000027078

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS R. CONKLIN
Name of Contact Person

THOMAS R. CONKLIN ATTORNEY & COUNSELOR PLLC
Firm/Company

442 S. TAMiami TRAIL
Address

OSPREY, FL 34229
City/State and Zip Code

TOM@THOMASCONKLIN.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS R. CONKLIN at (941) 366-2608
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

✓ **Mailing Address:**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: FLORA ROSA FOOD COMPANY LLC

SECOND: The Florida Document number of the limited liability company is: LL160000027078

THIRD: Document to be corrected is: LL160000027078

(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:

FLORA ROSA FOOD COMPANY LLC is misspelled due
to a typo. Correct spelling is FLORE ROSA FOOD COMPANY LLC

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.

Thomas R Conklin 3-14-16
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)