

L16000042437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

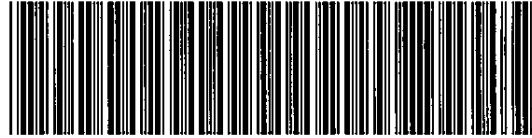
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 SEP -9 A 8:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

SEP 12 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 24, 2016

FRANCES MARTIN  
1112 N. MIAMI AVE  
MIAMI, FL 33136

SUBJECT: SEVENTY7, LLC  
Ref. Number: L16000042437

We have received your document for SEVENTY7, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 116A00018017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SEVENTY7, 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:

FRANCES MARTIN  
Name of Person

SEVENTY7 LLC  
Firm/Company

1112 N. MIAMI AVE  
Address

MIAMI FL 33136  
City/State and Zip Code

accounting@wonderlandmiami.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCES MARTIN at ( 305 ) 829-2911  
Name of Person 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:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>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: SEVENTY7, LLC

**SECOND:** The Florida Document number of the limited liability company is: L1160000042437

**THIRD:** Document to be corrected is: ARTICLES of Organization - Article III

**(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:

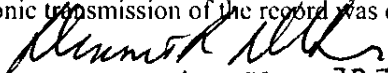
REGISTERED AGENT: FRANCES K. MARTIN  
1112 N MIAMI AVE  
MIAMI FL 33136

**OR**

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

**OR**

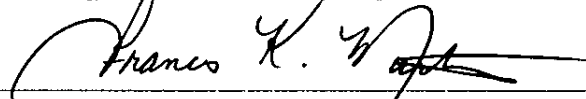
- ☐ The electronic transmission of the record was defective.

  
Signature of Authorized Representative 8-31-2016  
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)