

L16000045081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

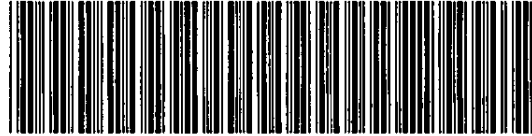
(Business Entity Name)

(Document Number)

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2016 MAR 29 P 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 30 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2016

ANGELA MADISON
JANIKING OF FORT MYERS
13723 JETPORT COMMERCE PKWY
FORT MYERS, FL 33913

SUBJECT: WENDY RODRIGUEZ & ADRES ROJAS, LLC
Ref. Number: L16000045081

We have received your document for WENDY RODRIGUEZ & ADRES ROJAS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 916A00006268

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wendy Rodriguez & Andres Rojas, 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:

Angela Madison

Name of Person

JaniKing of Fort Myers

Firm/Company

13723 Jetport Commerce Parkway

Address

Fort Myers, FL. 33913

City/State and Zip Code

amadison@janikingfortmyers.com

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

For further information concerning this matter, please call:

Angela Madison

Name of Person

at (239) 728-5464

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Wendy Rodríguez & Adres Rojas, LLC

SECOND: The Florida Document number of the limited liability company is: L16000045081

THIRD: Document to be corrected is: Spelling correction in LLC name

(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:

Adres Rojas. Missing the letter "n" in name.

Wendy Rodriguez & Andres Rojas, 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.

Shirley Madison
Signature of Authorized Representative

Date

3/30/16

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FLORIDA
SECRETARY OF STATE

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.

Shirley Madison
Registered Agent's Signature

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