

L16000103855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

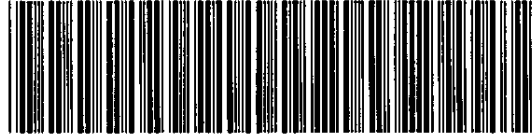
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

S Warren

AUG 01 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 21, 2016

THOMAS C. MORALE  
8451 GATE PARKWAY W, APT. 319  
JACKSONVILLE, FL 32216

SUBJECT: MORALE SALES AND SERVICE LLC  
Ref. Number: L16000103855

We have received your document for MORALE SALES AND SERVICE LLC and your check(s) totaling \$25.00. 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: 716A00015304

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Morale Sales and Service 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:

**Thomas G Morale**

Name of Person

**Morale Sales and Service LLC**

Firm/Company

**8451 Gate Pkwy W Apt 319**

Address

**Jacksonville FL 32216**

City/State and Zip Code

**Tommorale@gmail.com**

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

For further information concerning this matter, please call:

**Tom Morale**

Name of Person

at ( **904** ) **570-7037**

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: Morale Sales and Service LLC

**SECOND:** The Florida Document number of the limited liability company is: L16000103855

**THIRD:** Document to be corrected is: Articles of Organization for LLC

**(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:

The name and address of the person authorized to manage the LLC is incorrect.

The correct person and address is : Thomas G Morale, Managing Member

Address: 8451 Gate Parkway West Apt 319 Jacksonville FL 32216

**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.

James Amell  
Signature of Authorized Representative

7-27-16  
Date

**FILED**

SECRETARY OF STATE  
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.*

James Amell  
Registered Agent's Signature

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