

U16000128274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

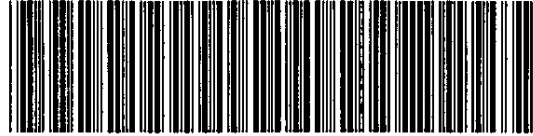
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



700288902607

09/01/16--01022--006 \*\*55.00

16 SEP -1 PM 4:02

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 06 2016

S. YOUNG

*The Law Offices of*  
**Snyder & Snyder, P.A.**  
Attorneys and Counselors at Law

**WILLIAM A. SNYDER, J.D., LL.M.**  
Florida Bar Board Certified — Wills, Trusts & Estates  
Fellow, American College of Trust & Estate Counsel (ACTEC)

**SHAWN C. SNYDER, M.A., J.D., LL.M.**  
Florida Bar Board Certified — Wills, Trusts & Estates  
Admitted to practice in Florida and Washington, DC

**OLGA I. GALANTER, J.D., LL.M.**

**KALEY N. BARBERA, J.D., LL.M.**  
Admitted to practice in Florida and New York

**JEFFREY A. FERGUSON, J.D., LL.M.**

7931 SW 45<sup>th</sup> Street  
Davie, Florida 33328

Phone: 954-475-1139  
Fax: 954-475-2634  
www.snyderlawpa.com

E-Mail: [lliana@snyderlawpa.com](mailto:lliana@snyderlawpa.com)

August 30, 2016

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: ***VIOLET A, LLC. ("Company")***  
***Document No.: L16000128274***

Dear Sir/Madam:

Enclosed please find the following regarding the above referenced Company:

1. Cover Letter; and
2. Statement of Correction to Articles of Organization ("Statement").

Please file the Statement with your office. After filing the Statement, please provide my office with a certified copy. We have enclosed our firm check in the amount of \$55.00 to cover the fees associated with the filing and requested certified copy. Additionally, enclosed please find a return self addressed stamped envelope for your convenience.

I thank you in advance for your attention and cooperation. Should you have any questions or need any additional information, please do not hesitate to contact me.

Very truly yours,

SNYDER & SNYDER, P.A.

  
Iliana M. Irizarry  
Legal Assistant

Encls.

FILED  
STATE  
CLERK OF COURT  
TALLAHASSEE, FLORIDA  
16 SEP - 1 PM 4:02

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **VIOLET A, 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:

**WILLIAM A. SNYDER**

Name of Person

**SNYDER & SNYDER, P.A.**

Firm/Company

**7931 SW 45 STREET**

Address

**DAVIE, FLORIDA 33328**

City/State and Zip Code

**ILIANA@SNYDERLAWPA.COM**

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

For further information concerning this matter, please call:

**ILIANA IRIZARRY**

Name of Person

**954**

Area Code

**475-1139**

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)

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
16 SEP -1 PM 4:02

**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: VIOLET A, LLC

**SECOND:** The Florida Document number of the limited liability company is: L16000128274

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

**(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 managers of the company are corrected to be as follows:

MGR - Adelaida C. Bailey - 4779 Collins Ave, PH4201, Miami Beach, FL 33140

MGR - Michel A. Manassa, Jr.- 4779 Collins Ave, PH4201, Miami Beach, FL 33140

**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.

Adelaida C. Bailey  
Signature of Authorized Representative

8/24/16  
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)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 SEP - 1 PM 4: 02