

L16000136573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

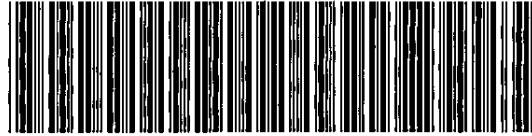
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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D. BRUCE  
SEP 30 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **BY DAY CAFE, 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:

**SHAWN C. 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)

2016 SEP 29 P 1:44  
TALLAHASSEE, FLORIDA

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**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: BY DAY CAFE, LLC

**SECOND:** The Florida Document number of the limited liability company is: L16000136573

**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 incorrectly listed. The manager of the company  
is: Gunars Mansons - 8887 Maple Hill Ct., Boynton Beach, FL 33473.

**OR**

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

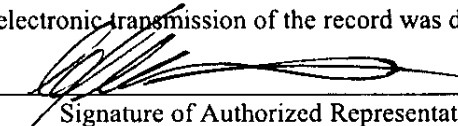
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OR**

- ☐ The electronic transmission of the record was defective.

  
\_\_\_\_\_  
Signature of Authorized Representative

9/27/16  
\_\_\_\_\_  
Date

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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.*

\_\_\_\_\_  
Registered Agent's Signature

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