

L16000160303

Florida Department of State
Division of Corporations
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HAMMERS & LADDERS, LLC

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September 19, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HAMMERS & LADDERS, LLC
3760 40TH LANE S., APT. J, BUILDING 27
ST. PETERSBURG, FL 33711

SUBJECT: HAMMERS & LADDERS, LLC
REF: L16000160303

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please enter the type of document to be corrected in the third section of the form.

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Stacey M Warren
Regulatory Specialist II

FAX Aud. #: H16000230924
Letter Number: 516A00020013

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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: HAMMERS & LADDERS, LLC

SECOND: The Florida Document number of the limited liability company is: L16000160303

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:

IN ARTICLE V THE MANAGER IS INCORRECTLY LISTED AS
MANDY LEVY. THIS IS A TYPO, AND THE SOLE MANAGER IS
JUSTIN HELMAN.

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.

JOHN N. GIORDANO, AUTHORIZED REPRESENTATIVE SEPTEMBER 16, 2016

Signature of Authorized Representative

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)

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 FLORIDA