

L16000215387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

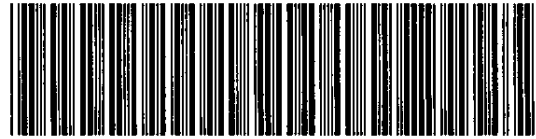
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/02/16--01016--019 **60.00

FILED
16 DEC 14 PM 2:59
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

DEC 14 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2016

TIFFANY GRAY
PO BOX 7503
TALLAHASSEE, FL 32314 US

SUBJECT: BROOKLIN & GRAY COMPANY, LLC
Ref. Number: L16000215387

RECEIVED
2016 DEC 14 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BROOKLIN & GRAY COMPANY, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), 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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 016A00025930

**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: Brooklin & Gray Company LLC

SECOND: The Florida Document number of the limited liability company is: L16000245387

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 incorrect name is Brooklin & Gray Company LLC.
The "correct" name is Brooklin & Green Company 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.

Chadley Gray
Signature of Authorized Representative

12/13/16
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.

Chadley Gray
Registered Agent's Signature

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