

L17000109759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

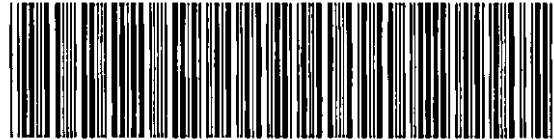
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JUL 13 AM 10:48

FILED

JUL 14 2017  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Naples Consulting Group, 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:

Hunter H. Chamberlin, Esq.

Name of Person

Chamberlin Law Firm, PA

Firm/Company

3630 W. Kennedy Blvd.

Address

Tampa, FL 33609

City/State and Zip Code

Hunter@chamberlinlawfirm.com

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

For further information concerning this matter, please call:

Hunter Chamberlin

Name of Person

813

Area Code

444-4777

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: Naples Consulting Group, LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000109759.

**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 original Articles of Organization listed the manager as Charles Wardell. The  
manager should be listed with his full name to avoid confusion with another individual  
by the same name. Therefore the manager should be listed as Charles W. B. Wardell, III.

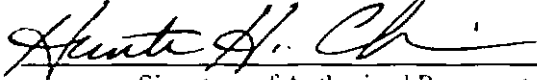
**OR**

- ☐ 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

7/19/17

Date

FILED  
2017 JUL 18 AM 10:48  
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.*

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

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