

# L1700184972

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((((I17000184972 3)))



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To:

Division of Corporations  
Fax Number : (850) 617-6383

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Account Name : SUPERBIZ.COM, INC.  
Account Number : I20070000160  
Phone : (800) 494-3124  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
DYNASTY CERTIFIED HOME INSPECTION SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

DIVISION OF CORPORATIONS

17 JUL 14 AM 9:00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O SIMMONS  
JUL 17 2017

STATEMENT OF CORRECTION  
FOR H17000184972 3  
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: DYNASTY CERTIFIED HOME INSPECTION SERVICES LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000149006

**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:

ARTICLE IV INCORRECTLY LISTS ONLY ONE (1) AMBR  
ARTICLE IV SHOULD CORRECTLY LIST A SECOND AMBR:  
LINDA G ELLIOTT, 3152 LITTLE ROAD UNIT 358, TRINITY, FL 34655

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

JULY 14, 2017  
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)

H17000184972 3

DIVISION OF CORPORATIONS  
 JUL 14 AM 9:00  
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