

L17000179334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

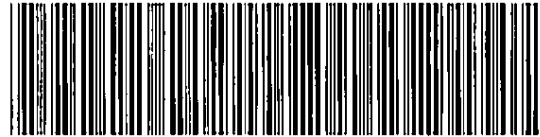
(Business Entity Name)

(Document Number)

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2017 AUG 23 AM 8:35

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AUG 28 2017
J. HARRIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 778486 8148762

AUTHORIZATION :

COST LIMIT : \$55.00

ORDER DATE : August 21, 2017

ORDER TIME : 5:51 PM

ORDER NO. : 778486-005

CUSTOMER NO: 8148762

DOMESTIC FILING

NAME: 110 W FIRST ST LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT.

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 110 W First St 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:

Gregory Totten

Name of Person

Trived Investments LLC

Firm/Company

5117 5th Way North

Address

St. Petersburg, FL 33703

City/State and Zip Code

gtotten@trived.com

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

For further information concerning this matter, please call:

Gregory Totten

727

249-3900

Name of Person

at (

Area Code

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 24, 2017

CSC
MELISSA ZENDER

SUBJECT: 110 W FIRST ST LLC
Ref. Number: L17000179334

RESUBMIT
Please give original
submission date as file date
2017 AUG 23 AM 8:35

We have received your document for 110 W FIRST ST LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document number and document to be corrected is missing. (Second and third)

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 017A00017422

17 AUG 25 AM 11:19

**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: 110 W First St LLC

SECOND: The Florida Document number of the limited liability company is: L17000179334

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 single member / owner of 110 W First St LLC should be:

110 W 1st St - a Series of Trived LLC. The manager is Trived Investments LLC.

The document incorrectly states that the owner is Trived LLC.

OR

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

FILED
2017 AUG 23 AM 8:35
TALLAHASSEE FLORIDA

OR

- ☐ The electronic transmission of the record was defective.

[Signature] 8/22/17

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)