

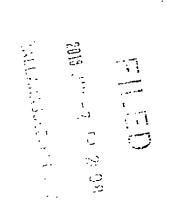
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COVER LETTER

TO: Registration Sec Division of Cor						
SUBJECT:	R. J. GIBS	DON ADVER	TISING L.L.C.			
Dear Sir or Madam:						
The enclosed Statement of	of Correction and fee(s) ar	e submitted for filing.				
Please return all correspo	ondence concerning this m	atter to the following:				
	Name of Person ADVERTIS; Firm/Company					
	Firm/Company	<u> </u>				
5 BAYVIC	Address					
TEDUESTA	FL 33 y	69		5 1.	20	
C	ity/State and Zip Code			1	: 55	
RJGORJ E-mail address: (to	Gibson - Combe used for future annual	report notification)		H # 201 201	2018 7 - 7 - 7	
For further information of	oncerning this matter, ple	ase call:		7.	3000	
Robins 1	(-6 Sna)	. 🖼 /	759 8110	-		
Name o	of Person	Area Code	758 848 Daytime Telephone Number			
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 323	ircle	Rej Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314			
Enclosed is a check for	the following amount:					
\$25 Filling Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy			

CR2E062 (9/15)

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.

TRST: The	ne name of the limited liability company is: R.J. GIBSON ADVERTISING L.L.C.
SECOND:	The Florida Document number of the limited liability company is: 17000 260 201
<u>THIRD</u> :	Document to be corrected is: Articlas of Organization
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
	ontains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected atement are as follows:
A	Prticle IV of the articles or Organization for the
<u> 141</u>	DOVE referenced Limited LiAbility Company was increach
<u>So</u>	pova referenced Limited LiAbility Company was increached bom'thes The Effective data SHOULD be 01/01/2018, NOT 12/20/2017. Please accept for \$25.65 in Filing
<u>or</u>	R Not 12/20/2017. Please accept fee \$25. los in Filing
	'as defectively signed. The manner in which the document was defectively signed and the appropriate correction are follows:
_	
	
<u>or</u>	<u>R</u>
] The	he electronic transmission of the record was defective.
	Signature of Authorized Penrecentative
	Signature of Authorized Representative Date
ignature of	of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign the designation).
hereby acc rovisions o bligations	stered Agent's Signature, if changing Registered Agent: ccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the s of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merel hange in the registered office address. I hereby confirm that the limited liability company has been notified in writin nge.
	Registered Agent's Signature
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)