

1/11/2018

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L17000262925**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
REDMON'S RESTAURANT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

**RECEIVED**

JAN 12 2018

**Resubmission Keep Date 1/11/18**

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JAN 16 2018  
LADDER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: REDMON'S RESTAURANT 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:

Charles Christopher Redmon

Name of Person

Redmon's Restaurant LLC

Firm/Company

370 Center Lake Lane Apt 3004

Address

Oviedo, Florida 32765

City/State and Zip Code

CRedmonCFA@gmail.com

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

For further information concerning this matter, please call:

Charles Redmon at ( 404 ) 414-0604

Name of Person

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)

**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: REDMON'S RESTAURANT LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000262925

**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 VI was left blank. It should have included the purpose below.  
The sole purpose for which the entity is formed is to operate franchised Chick-fil-A restaurant business(es)  
under a Franchise Agreement with Chick-fil-A, Inc. and to exercise all other powers necessary to, or reasonably  
connected with, the operation of the franchised Chick-fil-A restaurant business(es).

**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.

Kimberly Laughrey  
 Signature of Authorized Representative

1/11/2018

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)