

L18000103326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

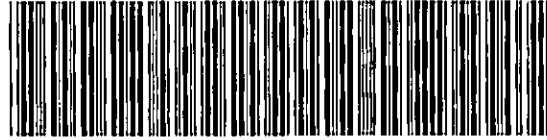
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/20/18--01029--025 **25.00

FILED
18 OCT 22 PM 4:30
TOLSON
FBI



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2018

ANTHONY ALASCIA
16739 SCHEER BLVD
HUDSON, FL 34667

SUBJECT: NO CHANCE COMPUTER SOLUTIONS, LLC
Ref. Number: L18000103326

We have received your document for NO CHANCE COMPUTER SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please correct document to read: Articles of Organizarion.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 918A00017895

*Correction
on Sun Biz.org
needed
to correct address
TKS*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: no chance computer solutions 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:

anthony alascia

Name of Person

Firm/Company

16739 scheer blvd.

Address

hudson florida 34667

City/State and Zip Code

ginburke38@GMAIL.COM

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

For further information concerning this matter, please call:

GENEVIEVE DIGIOVANN at (352) 678 2454

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

**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: NO CHANCE COMPUTER SOLUTIONS LLC

SECOND: The Florida Document number of the limited liability company is: LLC 18000103326

THIRD: Document to be corrected is: ADDRESS - 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:

ADDRESS IS 16739 SCHEER BLVD. HUDSON FLA 34667

OR

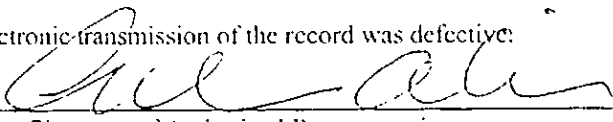


Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR



The electronic transmission of the record was defective:

 8/13/2016
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)