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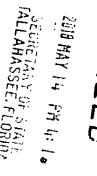
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COVER LETTER

TO: Registration Section Division of Corporations Missy Mandato Studios, 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: Missy Mandato Name of Person Missy Mandato Studios, LLC Firm/Company 2185 Talman Ct Address Winter Park FL 32792 City/State and Zip Code missymandato@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Missy Mandato 3415555 Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee S30 Filing Fee & \$55 Filing Fee & 560 Filing Fee, Certificate of Status Certified Copy 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: Missy Mandato Studios, LLC The Florida Document number of the limited liability company is: L18000110786 SECOND: Articles of Organization THIRD: (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: Name was entered incorrectly. The correct name is Missy Mandato Studio, LLC this is replacing Missy Mandato Studios, LLC. Should not be plural Please add EIN: 82-5253892 OR Was defectively signed. The manner in which the document was defectively signed and the appropriate of as follows: OR The electronic transpassion of the record was defective. Signature of Authorized Representative 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)