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### COVER LETTER

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TO: Registration Section Division of Corporations

# SUBJECT: Okaloosa Donuts, 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:

# CareySue Beasley

Name of Person

# Okaloosa Donuts

Firm/Company

# 29D Miracle Strip Pkwy SW

Address

## Fort Walton Beach, FL 32548

City/State and Zip Code

## okaloosadonuts@gmail.com

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

For further information concerning this matter, please call:

CareySue Beasley

Name of Person

#### Area Coo

850

Davtime Telephone Number

368-7413

MAILING ADDRESS:

**Division of Corporations** 

Tallahassee, Florida 32314

**Registration Section** 

P.O. Box 6327

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### Enclosed is a check for the following amount:

**\$**25 Filing Fee

S30 Filing Fee & Certificate of Status S55 Filing Fee & Certified Copy S60 Filing Fee. Certificate of Status & Certified Copy FILED

### 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: Okaloosa Donuts, LLC

SECOND: The Florida Document number of the limited liability company is: L18000161788

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:

## Typo: Should be Okaloosa Donuts NOT dounts

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<u>OR</u>		H T	-	
Was defectively signed. as follows:	The manner in which the document was defectively signed and the ap	proprijat	ഷ	ection are
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#### <u>OR</u>

THIRD:

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 $\Box$ 

The electronic transmission 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: Certified Copy:

\$25.00 \$30.00 (optional)