## 118000201613

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## **COVER LETTER**

TO: Registration Secti Division of Corpo			•	
SUBJECT: Bed	verly Home I.  Name of Limi	nteriors + Designs Lited Liability Company	<u>.</u>	
The enclosed Articles of Art	nendinent and fee(s) are sub-	mitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
		rly Mamrak Name of Person	<b>N</b>	
	Beverly 1	Home Interiors + 1 Firm/Company	Jesigns, LUC	
	1062	6 Mistflower Lar Address	e	
		Address		
	Ta	mpa, FL 3364 City/State and Zip Code	7	
	E-mail address: (	amvaK @ yahoo.co	tion) $\Rightarrow c \geq$	
For further information concerning this matter, please call:			SECRETARIA	7
Julie Ita	ohl	at (813) 961-180 Area Code Daytime To	elephone Number	<b>1</b>
Name of P  Enclosed is a check for the	erson	Area Code Daytime To	elephone Number	<del>- पू</del>
\$25.00 Filing Fee	_	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fec.	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
			(вошновы съру в спсимен)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassce, FL 32314

STREET/COURIER ADDRESS:

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

## 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: Beverly Home Interiors a Designs LLC SECOND: The Florida Document number of the limited liability company is: L18000201613 Document to be corrected is: 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 X statement are as follows: Original LLC entered incorrectly. The correct LLC name is Beverly Home Interiors + Design LLC OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. П 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)