

LI8000230788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

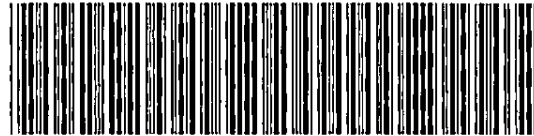
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200319733892

SECRETARY OF STATE  
TALLAHASSEE, FL

2018 OCT 15 PM 2:16

FILED

10/17/18--01013--024 \*\*30.00

2018 OCT 15 AM 10:32

6126  
S. PRATHER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AAA Hold Inspectors 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:

Yossi Noah  
Name of Person

AAA Hold Inspectors  
Firm/Company

~~11352 W SR 84 #13~~  
Address

Davie FL 33325  
City/State and Zip Code

Shelly@aaamoldinspectors.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shelly Noah at (954) 629 6223  
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: AAA Mold Inspectors LLC

**SECOND:** The Florida Document number of the limited liability company is: L18000230788

**THIRD:** Document to be corrected is: Name of Company

**(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:

AAA Mold Inspectors NC LLC

**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.

\_\_\_\_\_  
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)

2018 OCT 15 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**