

LI9 000 217 529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

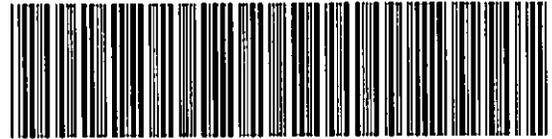
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 NOV 20 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SULKER
NOV 2 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2019

GRUMPY'S PIZZA PUB LLC
1682 INDIAN HILLS DR
MOORE HAVEN, FL 33471

SUBJECT: GRUMPY'S PIZZA PUB LLC
Ref. Number: L19000217529

We have received your document for GRUMPY'S PIZZA PUB LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 519A00020672

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grumpy's Pizza Pub 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:

Barbara Swift
Name of Person

Grumpy's Pizza Pub LLC
Firm/Company

1682 Indian Hills Dr
Address

Moore Haven, Florida 33471
City/State and Zip Code

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

For further information concerning this matter, please call:

Barbara C Swift at (363) 484-3005
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: GRUMPY'S PIZZA PLS LLC

SECOND: The Florida Document number of the limited liability company is: L19000217529

THIRD: Document to be corrected is: FLORIDA LIMITED LIABILITY COMPANY FORM

(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:

ENTITY NAME WAS INCORRECTLY LISTED AS
COLOLOLO INC. (Manager's name incorrect)
THE CORRECT ENTITY NAME IS COLDBORNER INC.

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] _____ 11/20/19
Signature of Authorized Representative Date

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STATE
TALLAHASSEE
FLORIDA

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)