

L 200000 13518

(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



900340187719

02/05/20 --01012--002 --000000

Statement
of
Correction

FILED
CLERK OF SUPERIOR
COURT OF CONNECTICUT
2020 FEB -5 AM 10:52

FEB 06 2020

D CONNELL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CYPHER ELECTRIC 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:

Hector J Moreno Ramos

Name of Person

Firm/Company

2502 Quail Run Blvd

Address

Kissimmee, FL 34744

City/State and Zip Code

hek93@live.com

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

For further information concerning this matter, please call:

Hector J Moreno Ramos

407

508-4686

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

SECOND: The Florida Document number of the limited liability company is: L20000013518

THIRD: Document to be corrected is: **Articles of Organization**

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

on the registered name and title MGR.

The name that needs correction is from Hector J Moreno to Hector J Moreno Ramos.

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.

Neider J Mauro Ramos

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
SECRETARY OF STATE
DIVISION OF CERTIFICATES
2020 FEB - 5 AM 10:52