L200000 38693

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COVER LETTER

TO: Registration Division of C					
Vaha Si	hop LLC				
SUBJECT:	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Stateme	ent of Correction and fee(s) a	are submitted for filin	ឬ.		
Please return all corre	espondence concerning this r	natter to the following	<u>g</u> :		
Ramon Vargas					
	Name of Person		_		
Vaha Shop LLC					
Firm/Company			-		
2322 caravelle cir					
	Address		-		
Kissimmee, Florida.	34746				
	City/State and Zip Code		-		
vahashopllc@gmail.e	com				
E-mail address:	(to be used for future annua	I report notification)	-		
For further information	on concerning this matter, pl	ease call:			
Ramon Vargas		407 at (9527248		
Nan	ne 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		

CR2E062 (9/15)

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: Vaha Shop LLC The Florida Document number of the limited liability company is: L20000038693 SECOND: Document to be corrected is: Article III, the name of the registered agent. THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Ø Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: At the time of registering the company, by mistake, I put the word SR in my name I want it to be changed, my correct name is Ramon Vargas, without SR. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction a \square as follows: OR \square The electronic transmission of the record was defective. 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. Thereby 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)