L26600067249

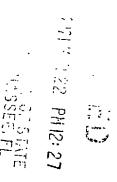
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
	(6)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ľ

Office Use Only



200361634652

03/22/21--01033--001 **25.00



2021 نازان

COVER LETTER

ΓO: Registration Section Division of Corporations		
COLONBIS LLC SUBJECT:		
SUBJECT.	Name of Limited Liab	pility Company
Dear Sir or Madam:		
The enclosed Statement of Correction and fee(s) are submitted for filin	g.
Please return all correspondence concerning th	is matter to the following	g:
EDGARD H. CUENCA		
Name of Person		_
COLOMBIS, LLC		
Firm/Company		_
6099 STIRLING RD. STE. 224		
Address		-
DAVIE, FL 33314		
City/State and Zip Code		_
benmurcia03@gmail.com		
E-mail address: (to be used for future ann	nual report notification)	_
For further information concerning this matter.	. please call:	
EDGARD H. CUENCA	754 at (802-1187
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 amoun	t:	
\$25 Filing Fee \$30 Filing Fee & Certificate of State	□\$55 Filing Fee & us 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:____ The Florida Document number of the limited liability company is: L20000067249 **SECOND:** THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT M Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: INCORRECT BUSINESS NAME: COLONBIS LLC TO BE CORRECTED AS: COLOMBIS, LLC. MISTAKE: THE LETTER "N" CORRECT: THE LETTER "M" <u>or</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic rd was defective. Signature of Authorized Representative 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)

DIVISION OF CORPORATIONS



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Limited Liability Company COLONBIS, LLC

Filing Information

Document Number

L20000067249

FEI/EIN Number

NONE

Date Filed

03/02/2020

Effective Date

03/01/2020

State

FL

Status

ACTIVE

Principal Address

6099 STIRLING RD, STE, 224

DAVIE, FL 33314

Mailing Address

6099 STIRLING RD. STE, 224

DAVIE, FL 33314

Registered Agent Name & Address

MURCIA, RUBEN

6099 STIRLING RD. STE. 224

DAVIE, FL 33314

Authorized Person(s) Detail

Name & Address

Title MGR

CUENCA, EDGARD H

6099 STIRLING RD. STE. 224

DAVIE, FL 33314

Annual Reports

No Annual Reports Filed

Document Images

03/02/2020 - Florida Limited Liability

View image in PDF format