

120000267879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

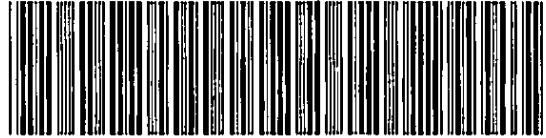
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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11/20/20--01010--000 **25.00

S TALLENT

JAN 08 2020

2020 NOV 20 AM 10:35

Start
at
Carnegie

COVER LETTER

TO: Registration Section
Division of Corporations

MY TRU SCORE, LLC

SUBJECT: _____
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:

STEVE PENA

Name of Person

MY TRU SCORE, LLC

Firm/Company

3802 CARROLLWOOD PL CIR #207

Address

TAMPA, FL 33624

City/State and Zip Code

INFO@MYTRUSCORE.COM

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

For further information concerning this matter, please call:

STEVE PENA

813

495-0624

Name of Person

at (_____) _____

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

**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.

MY TRU SCORE, LLC

FIRST: The name of the limited liability company is: _____

L20000267879

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

Authorized Person(s) Detail: Steve Pena TITLE: P TO TITLE: MGR

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

(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:

Steve Pena TITLE: P, CHANGE TO MGR

ACCIDENTALLY TITLED PRESIDENT SHOULD HAVE BEEN TITLE MGR

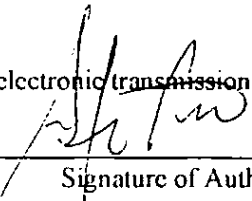
CHANGE TO Steve Pena MGR

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

11/17/20

7:00 PM NOV 20 AM 10:35

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)