L20000309020

(Requestor's Name)	
(Address)	700355000
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	11/16/2001026
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	01/29/0101019
Special Instructions to Filing Officer:	S TALLENT FEB 1 - LULI
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2020

REGINA HARMAN REGINA HARMAN, LLC PO BOX 1736 ORMOND BEACH, FL 32175

SUBJECT: REGINA HARMAN, LLC

Ref. Number: L20000309020

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE FORM YOU HAVE SUBMITTED IS FOR A FLORIDA CORPORATION, BUT YOUR ENTITY IS A LIMITED LIABLILITY COMPANY. PLEASE COMPLETE AND RETURN THE ENCLOSED BLANK FORM(S). THERE IS A FEE OF \$7.50 STILL DUE FOR THE CERTIFICATION DOCUMENTATION.

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.

Thank you for your assistance. I great appreciate it. It how exclosed the regress documents and additional monios required

Susan Tallent Regulatory Specialist II

Letter Number: 020A00025737

www.sunbiz.org

Regina Harman

P.O. Box 1736 Ormond Beach, FL 32175 386.871.9191 Reginah0413@gmail.com

Dear Sir or Madam,

When filing my original Articles of Organization L20000309020 on September 30, 2020, I inadvertently used my brokerage address as the principal office address and my physical address as my mailing address. I changed this information online, but my Articles of Organization still show the original error.

Since this is not just an Amendment to the Articles of Organization, I am submitting an Articles of Correction form so the original Articles of Organization will no longer show my brokerage address. My LLC was never located at that address and I made a mistake in listing their office.

I have left several messages with your office and have not received a phone call in return. If this is not the correct form to get the wrong address off of my records, please have someone call me and let me know the correct form. I truly appreciate your assistance in this matter.

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Regina Harman

COVER LETTER

TO: Registration So Division of Co				
SUBJECT: 4	Regina Harn	Name of Limited Liab	vility Company	
Dear Sir or Madam:				
The enclosed Statement	of Correction and fee(s) a	are submitted for filing	ជ.	
Please return all corresp	ondence concerning this r	matter to the following	g:	
Regina F Regina F P.O. Box Ormand t	Name of Person Name of Person Tarman, LL Firm/Company 1736 Address Cach, FL City/State and Zip Code	32175	- -	
reginah @	9413@Gmac o be used for future annua	I report notification)	_	
Regina F	concerning this matter, pl 	ease call:at () <u>87/. 9/9/</u> Daytime Telephone Numbe	er
Mailing Address Registration Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27		Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	ee
Enclosed is a check for	r the following amount:			411
□\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	☐\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	\$ 7.50 add then to original payment of \$52.50.

TR2E062 (9/15)

STATEMENT OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

ECOND:	The Florida Document number of the limited liability company is: $\angle 2$	0000 309 020
HIRD:	Document to be corrected is: Articles of Organiza	ation
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICA	ABLE STATEMENT
state	tains an incorrect statement. The incorrect statement, the reason the statement is ement are as follows: The II: Street address of Principal 5039 (Correct) 670 Cordova Avenue, Ormand B	ect) Ocean Blyd, Situ Kor, 39
Ø) Ac —	ticle IT: Mailing address of LLC - (incorrect) into Ormand Beach, Fi 32174 (Correct) P.O. Box 1731e, Ormand Beach	O Cardova Axenue,
<u>OR</u>		
Was	s defectively signed. The manner in which the document was defectively signed	
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as for the gnature of	clectronis transmission of the record was defective.	2021 JAS 19 NII 7: 48

Filing Fee: Certified Copy:

\$25.00

Registered Agent's Signature

\$30.00 (optional)