

L20000322552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Statement of
Correction

04/05/21--01041--013 **30.00

FILED
2021 JUN 11 PM 12:04

JUN 11 2021

A RAMSEY

COVER LETTER

Division of Corporations

SUBJECT:

Dear Sir or Madam:

Tom Hasil

Tom Hasil Studio LLC

1065 Windrift Ln

Atlantic Beach, FL 32233

barbaramiko@yahoo.com

For further information concerning this matter, please call:

at 312-823-9501

Mailing Address:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

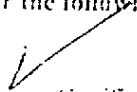
Street Address:

Registration Section

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Enclosed is a check for the following amount:



Certificate of Incorporation

Certified Copy

Certificate of Status &



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2021

TOM HASIL
1065 WINDRIFT LN
ATLANTIC BEACH, FL 32233

SUBJECT: TOM HASIL STUDIO LLC
Ref. Number: L20000322552

We have received your document for TOM HASIL STUDIO LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 521A00012290

**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: TOM HASIL STUDIO LLC

SECOND: The Florida Document number of the limited liability company is: 120000322552

THIRD: Document to be corrected is: ORIGINAL 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:

CHANGE TITLE FOR TOM HASIL FROM LMT TO MEMBER

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.

T. Hasil 4-2-21
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.

Registered Agent's Signature

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