121000001622

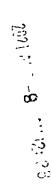
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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March 26, 2021

NESTOR PINZON 7300 W MCNAB RD STE 214 TAMARAC, FL 33321

SUBJECT: READY SET GOLD MULTI SERVICES LLC

Ref. Number: L21000001622

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

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.

Susan Tallent Regulatory Specialist II

Letter Number: 321A00006340

COVER LETTER

TO: Registration Division of C					
	SET GOLD MULTISERV	ICES LLC			
SUBJECT:	BJECT:Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Stateme	ent of Correction and fee(s) a	re submitted for filing	ž.		
Please return all corre	espondence concerning this n	natter to the following	3:		
NESTOR PINZON					
	Name of Person		-		
ALL BUSINESS SO	LUTIONS LLC				
	Firm/Company		-		
7300 W MC NAB R	D STE 214				
	Address		-		
TAMARAC FL. 333	21				
	City/State and Zip Code		-		
NPINZON@ALLBS	OLUTIONS.COM				
E-mail address:	(to be used for future annual	report notification)	-		
For further informatio	on concerning this matter, ple	ease call:			
SANDRA DUQUE		954 at (274-7817		
Nar	ne of Person	Area Code	Daytime Telephone Number		
P.O. Box 6	on Section f Corporations		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

	name of the limited liability company is: READY SE	•
SECOND: [HIRD:	The Florida Document number of the limited lial Document to be corrected is: [L21000001622 A	bility company is: RTICLES OF ORGANIZATION
	(CHECK THE APPROPRIATE BOX AND CO	MPLETE THE APPLICABLE STATEMENT
Contag Stater Stater Contag Stater Stater Contag Stater Stater Contag Stater Stater Contag Stater Contag Stater St	ains an incorrect statement. The incorrect statement ment are as follows:	, the reason the statement is incorrect, and the corrected
The I	LLC correct effective date is 01/01/2021- please updat	e.
OR Was of as fol	defectively signed. The manner in which the docum lows:	ent was defectively signed and the appropriate correction a
		C C
<u>OR</u>		رب بن
□ The e	lectronic transmission of the record was defective.	04/05 -2021 Date
	Signature of Authorized Representative	Date
ignature of necepting the o	ew registered agent, if applicable :(NOTE: if correctlesignation).	ting the registered agent, the new registered agent must sig
hereby acceptions of a bligations of	ill statutes relative to the proper and complete perfo my position as registered agent as provided for in C se in the registered office address. I hereby confirm	act in this capacity. I further agree to comply with the rmance of my duties, and I am familiar with and accept the hapter 605, F.S. Or, if this document is being filed to mere that the limited liability company has been notified in writi
	Registered Age	ent's Signature
	Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)

\$30.00 (optional)