

9/10/2021

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L210003364123ABCW

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : GFS TAX & ACCOUNTING SERVICES
 Account Number : I20140000089
 Phone : (754)301-2128
 Fax Number : (954)252-4650

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@GFSTAXACCT.COM

2021 SEP 10 AM 11:24
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 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 ALLOG USA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SEP 13 2021
 S. PRATHER

2021 SEP 10 AM 11:57
 TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALLOG USA LLC
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:

JULIANA MACHADO
Name of Person

GFS TAX & ACCOUNTING SERVICES
Firm/Company

11764 W SAMPLE RD STE 102
Address

CORAL SPRINGS, FL 33067
City/State and Zip Code

JULIANA@GFSTAXACCT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIANA MACHADO 754 301-2128
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 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.

FIRST: The name of the limited liability company is: ALLOG USA LLC

SECOND: The Florida Document number of the limited liability company is: L21000397768

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:

MISSING A MEMBER, THERE WASNT ENOUGH SPACE TO INCLUDE A MEMBER

AMRB - ANDREIA P OLIVEIRA ROSSI

AV. BRASIL 577 APT 1001 BALNEARIO CAMBORIU SC, 88330-043 BR

OR

- Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

[Blank lines for signature correction details]

OR

- The electronic transmission of the record was defective.

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)

FILED 2021 SEP 10 AM 11:24