

121000421128

(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:

[Handwritten signature]

Office Use Only



600373164076

10/04/21--01041--001 **25.00

2021 OCT -14 AM 10:23

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

thank you :)

SUBJECT: TRUAX HOMES, 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:

NAOMI KECK

Name of Person

NAYCOR SOLUTIONS, INC

Firm/Company

3590 MALAGROTTA CIR

Address

CAPE CORAL, FLORIDA 33909

City/State and Zip Code

AUSTIN.TRUAX@GMAIL.COM

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

For further information concerning this matter, please call:

NAOMI KECK at (239) 230-4053
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
cash

☐ \$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: TRUAX HOMES, LLC

SECOND: The Florida Document number of the limited liability company is: L21000421128

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:

The RA is Bradley E Cozza. The MBR/MGR is Austin Truax. When adding the RA, Google auto fill changed the Manager from "Austin Truax" to "Bradley E Cozza" and it was ACCIDENTALLY filed INCORRECTLY. Brad is ONLY the RA, and the Articles of Organization should show AUSTIN TRUAX is the SOLE MBR / MANAGER.

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.

Naveed K 10/15/2021
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)

Deborah

FLORIDA DEPARTMENT OF STATE

No. 06615

Date: 10-4-21

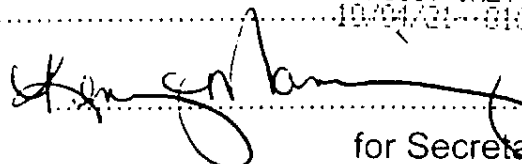
RECEIVED FROM: Naomi Keck

the sum of Twenty Five 00/100 — Dollars \$ 25.00

For the following: Statement of Correction for Foreign LLC

Truax Homes, LLC

DOS-4500453-4235443755
DEPOSIT ONLY 25.00
10/04/21-01041-201


for Secretary of State

THIS MONEY PAID INTO THE STATE TREASURY

All receipts issued and papers filed subject to clearing and final payment of remittance check.