# 121000437160

<del></del>
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/12/2021	_		
E. 05			**WALK IN**
ENTITY NAME FLOR	RIDA MADE IN AMERICA	A STORE, LLC	
DOCUMENT NUMBER	L21000437160		
	**PLEASE FILE THE P	ATTACHED AND RETURN**	
xxxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts & Certificate of Good Standin		
	**APOSTILLE' / NOT	TARIAL CERTIFICATION**	
COUNTRY OF DESTINA	TION	<del></del>	
NUMBER OF CERTIFICA	TES REQUESTED		
TOTAL OWED \$25.00		ACCOUNT #: I2016000007	2
		S 8 FM	
Please call Tina at i	the above number for any	i issues or concerns. Thank you so	n much!

### **COVER LETTER**

	gistration Sec ision of Cor					
SUBJECT:	Florida Made in America Store LLC					
oczone i,	Name of Limited Liability Company					
Dear Sir or M	Aadam:					
The enclosed	l Statement	of Correction and fee(s)	are submitted for filir	ng.		
Please return	all correspo	ondence concerning this	matter to the followin	if:		
Fabrizio Ler	ıgua					
	<del></del>	Name of Person		_		
ZenBusiness	s INC.					
		Firm/Company		<del>-</del>		
5511 Parker	est Dr. Suite	103				
		Address		_		
Austin, TX	78731					
	Ci	ty/State and Zip Code		_		
fulfillment@	)zenbusines:	s.com				
E-mail	address: (to	be used for future annua	l report notification)			
For further in	nformation c	oncerning this matter, pl	ease call:			
Fabrizio Len	igua		512 at (	237-7349		
	Name o	f 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:\_\_\_\_ The Florida Document number of the limited liability company is: L21000437160 SECOND: Document to be corrected is: THIRD: (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 incorrect statement: Effective date is equal to filing date (10/06/2021) Effective date should be January 03 2022 Please change the effective date to January 03 2022 <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u>  $\overline{\mathbf{C}}$ The electronic transmission of the record was defective. Ralph Perillo 10/11/2021 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

\$30.00 (optional)

Certified Copy: