(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:					
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 16, 2022

JOSEPH T. CHARLES 9449 NE 48TH ST. OKEECHOBEE, FL 34972

SUBJECT: OK CORRAL GUN CLUB LLC

Ref. Number: L22000010997

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L19000120136.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Darlene Connell
Regulatory Specialist II Supervisor

www.sunbiz.org

Letter Number: 822A00003841

Division of Companytions DO DOV 6297 Tollahossos Florido 29214

## COVER LETTER

TO:	Registration Section Division of Corporations		
CHDIE	OK Corral Gun Club LLC		
SUBJF	Name of	Limited Liabi	lity Company
Dear Si	ir or Madam:		
The en	closed Statement of Correction and fee(s) are subn	nitted for filing	
Please	return all correspondence concerning this matter to	the following	:
Joseph	T. Charles		
	Name of Person		
Charle	s Sr. Enterprises Holding Company		
	Firm/Company		
9449 8	NE 48th St		
	Address		
Okeec	hobee FL 34972		
	City/State and Zip Code		
cmess	ina@okcorralgunclub.com		
	E-mail address: (to be used for future annual report	notification)	-
For fu	rther information concerning this matter, please ca	11:	
Camil	a Messina	772 ι (	971-0272
	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
Enclo	sed is a check for the following amount:		
□S25		5 Filing Fee & Certified Copy	\$\infty\$

## 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. OK Corral Gun Club, LLC FIRST: The name of the limited liability company is The Florida Document number of the limited liability company is: L22000010997 SECOND: Document to be corrected is: \_\_\_\_\_\_ Articles of Organization for Florida Limited Liability Company 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: Charles sr. Enterprises Holding Co. LLC. The name of the LLC was submitted wrong. The correct name is Charles Sr. Enterprises, LLC. When filling out the information online, the computer autocorrected the name and caused the document to be submitted with the wrong information  $\underline{OR}$  $\Box$ 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. S Signature of Authorized Representative 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 kereby 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)

Enterprises

Holding Co. LLC.

SK

Correct LLC

CR2E062 (9/15)