

L22000065819

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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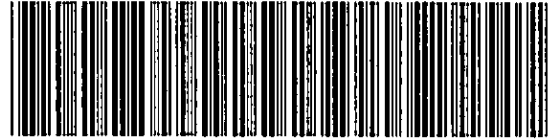
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2022 APR 25 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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2022 APR 25 AM 11:35

SECRETARY OF STATE  
TALLAHASSEE, FL

April 7, 2022

JEFFREY H STOLTZ  
12110 SUNSET HILLS RD STE 600  
RESTON, VA 20190

SUBJECT: TACTIC MANAGEMENT GROUP, LLC  
Ref. Number: L22000065819

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):

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.

Querida R Silas  
Regulatory Specialist II

Letter Number: 622A00008153

**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: Tactic Management Group LLC

**FILED**  
**2022 APR 25 PM 1:23**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

**SECOND:** The Florida Document number of the limited liability company is: L22000065819

**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:

Typographical error in Article II (street address of principal office and mailing address), Article III (registered office address), and Article IV (authorized members' address). Each reference in such articles should be "1934" Hawaii Ave NE, St. Petersburg, FL 33703 instead of "934" Hawaii Ave NE, St. Petersburg, FL 33703.

**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.

Tyler Murray 4/21/2022  
\_\_\_\_\_  
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)