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Office Use Only



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2022

RONALDO PINA PO BOX 9476 CORAL SPRINGS, FL 33075

SUBJECT: MAC GRAPHICS DESINGS, LLC Ref. Number: L22000354022

We have received your document for MAC GRAPHICS DESINGS, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 722A00027445

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Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

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TO: Registration Section Division of Corporations

SUBJECT: MAC GRAPHICS DE SINGS, 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:

RONALDO PINA				
Name of Person MAC GRAPHICS DESVIGS LLC				
Firm/Company				
YO BOX 4476 Address				
CORAL BRRINGS FL, 33075 City/State and Zip Code				
NRIFLO MAC-GRAPHICS COM				

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

For further information concerning this matter, please call:

Name of Person

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

Daytime Telephone Number

DEC 22 AM 8:

Enclosed is a check for the following amount:

S25 Filing Fee

S30 Filing Fee & Certificate of Status □\$55 Filing Fee & □ Certified Copy

Area Code

\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (9/15)



STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to sect <u>FIRST</u> : The nat	ion 605.0209, F.S., this document is being submitted to correct a previously filed document.	2022 DEC 22	
- SECOND:	The Florida Document number of the limited liability company is: 1220035461	AM (- [7]
THIRD:	Document to be corrected is: ENTITY'S NAME	8	_

(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:

THERE'S a TYPO ON THE NAME IT SHOULDN'T NAME AC GRAPHICS DEGINGS, LLC, IT SHOULD Hics DEGIGNS, LC.

<u>OR</u>

□ 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.

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: Certified Copy: \$25.00 \$30.00 (optional)

CR2E062 (9/15)