

L22 000406800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

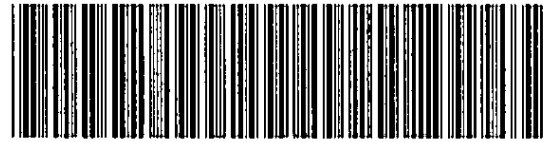
(Business Entity Name)

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11/28/22

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Facsimile 407-425-6167

November 22, 2022

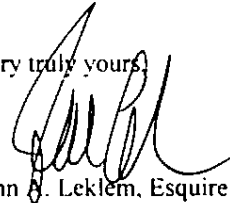
Department of State
Division of Corporations
Section Name
P.O. Box 6327
Tallahassee, FL 32314

Re: Document L22000406800 / The Woodland Elves, LLC

Dear Sirs:

Enclosed please find the corrected Articles of Organization for the above entity. This filing corrects spelling and zip codes. Also enclosed is check #5477 for the cost of the filing this corrected document. If there is anything else that is needed, please contact the undersigned.

Very truly yours,



John A. Leklem, Esquire

JAL/lml

Encs.: Corrected Articles
Check #5477

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Articles of Organization
For
Florida Limited Liability Company
[Corrected] *Articles of Correction*

Article I

The name of the Limited Liability Company is:

THE WOODLAND ELVES LLC

Article II

The street address of the principal office of the Limited Liability Company is:

**6520 ST. PARTIN PLACE
ORLANDO, FL, US 32812**

The mailing address of the Limited Liability Company is:

**6520 ST. PARTIN PLACE
ORLANDO, FL, US 32812**

Article III

The name and Florida street address of the registered agent is:

**SHARY WILLIAMSON
6520 ST. PARTIN PLACE
ORLANDO FL, 32812**

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: SHARY WILLIAMSON

Article IV

The name and address of person(s) authorized to manage LLC:

**Title: MGR
SHARY WILLIAMSON
6520 ST. PARTIN PLACE
ORLANDO, FL, 32812 US**

Article V

The effective date for this Limited Liability Company shall be:

09/17/2022

Signature of member or an authorized representative

Electronic Signature: //JOHN LEKLEM

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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11-28-22