

# L23000072889

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2023 APR -3 PM 4:11  
CLERK OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: APRN 34209  
Name of Limited Liability Company

Dear Sir or Madam:

3/30/23

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carol L. Harrington  
Name of Person

APRN 34209 LLC  
Firm/Company

2385 Landings Circle  
Address

Bradenton, FL 34209  
City/State and Zip Code

~~APRN@~~ APRN 34209@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Harrington at 941 405 7024  
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

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: APRN 34209

**SECOND:** The Florida Document number of the limited liability company is: L23000072889

**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:

Name + address of persons authorized to  
manage LLC should also include:

Carol Harrington (Article IV)  
2385 Landings Circle  
Bradenton, FL 34209

**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.

Carol Harrington 3/30/23  
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.*

Carol Harrington  
Registered Agent's Signature

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

FILED  
2023 MAR 30 PM 4:11  
CLERK OF STATE  
TALLAHASSEE, FL

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L23000072889  
FILED 8:00 AM  
February 09, 2023  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:

APRN 34209, LLC

**Article II**

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

2385 LANDINGS CIRCLE  
BRADENTON, FL. 34209

The mailing address of the Limited Liability Company is:

2385 LANDINGS CIRCLE  
BRADENTON, FL. 34209

**Article III**

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

CAROL HARRINGTON  
2385 LANDINGS CIRCLE  
BRADENTON, FL. 34209

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: CAROL HARRINGTON

**Article IV**

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

Title: MGR  
KEVIN TOMLINSON  
675 69TH AVE S  
SAINT PETERSBURG, FL. 33705

*\* add CH*  
*Carol Harrington*

L23000072889  
FILED 8:00 AM  
February 09, 2023  
Sec. Of State  
jafason

**Article V**

The effective date for this Limited Liability Company shall be:

02/08/2023

Signature of member or an authorized representative

Electronic Signature: CAROL HARRINGTON

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.