

L23000429808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

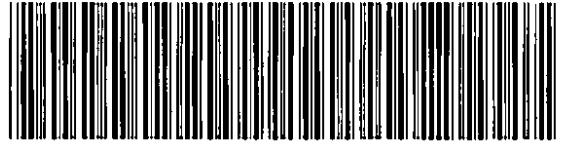
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
SEP 27 2023

Office Use Only



400415889514

FILED
23 SEP 27 AM 9:19
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA

09/27/23--01001--009 **30.00

RECEIVED
2023 SEP 27 AM 8:37
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Forest Technology Solutions 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:

Bailin Zhou

Name of Person

Forest Technology Solutions LLC

Firm/Company

85160 Sagaponack Drive

Address

Fernandina Beach, FL 32034

City/State and Zip Code

bailinz@hotmail.com

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

For further information concerning this matter, please call:

Bailin Zhou

at (904) 430-7533

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

CR2E062 (9/15)

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

FILED
23 SEP 27 AM 9:19
CLERK OF CIRCUIT COURT
STATE OF FLORIDA

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: Forest Technology Solutions LLC

SECOND: The Florida Document number of the limited liability company is: L23000429808

THIRD: Document to be corrected is: Certificate of Status

(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:

"...effective October 14, 2023, as shown by the records of this office." I made a typo when I submitted the

application. The correct statement is "...effective Septmeber 14, 2023, as shown by the records of this office." ,

because I have a contract to require the effective date to be September 14, 2023.

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.

Baird J. Men

Signature of Authorized Representative

9/26/2023

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)