

L25000273494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

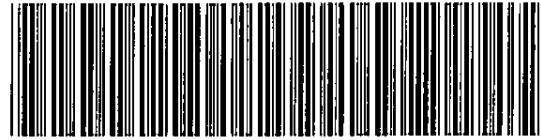
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUN 26 2025

Office Use Only



000453201160

FILED
2025 JUN 25 PM 3:30

RECEIVED
2025 JUN 25 PM 4:04
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from the account: I20210000160: \$25.00

Authorized Signature 

P & P Business Consulting LLC L25000273494

Business Name #Document

☒ Certified copy of Filing

☐ Certificate of Status

NEW

☐ Profit
☐ Not for Profit
☐ LLC
☐ Domestication
☐ INC
☐ CORP
☐ PLLC
☐ GP

AMENDMENTS

☐ Amendment
☐ Resignation of Member/MGR
☐ Statement of change of Registered
☐ Revocation of Dissolution
☐ Conversion
☒ Statement of Correction
☐ Merger
☐ DISSOLUTION

OTHER FILINGS

☐ TRANSMITTAL LETTER

☐ Fictitious Name -

☐ Statement of Authority

☐ Other:

REGISTRATION/QUALIFICATIONS

☐ Foreign Filing
☐ Partnership
☐ Reinstatement
☐ Articles of CORRECTION
☐ Withdraw of Certificate of Authority
☐ TRADEMARK
☐ Domestication

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P & P BUSINESS CONSULTING, 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:

LAWRENCE PRESSER

Name of Person

LAWRENCE PRESSER

Firm/Company

3208 SE 12TH ST. #303

Address

POMPANO BEACH, FLORIDA 33062

City/State and Zip Code

lpresse2001@yahoo.com

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

For further information concerning this matter, please call:

LAWRENCE PRESSER

Name of Person

at (954)

Area Code

554-2043

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
x XX
☐ \$30 Filing Fee &
Certificate of Status
☐ \$55 Filing Fee &
Certified Copy
☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2B062 (9/15)

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

FILED
2025 JUN 29 PM 3:29

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: P & P BUSINESS CONSUTING, LLC

SECOND: The Florida Document number of the limited liability company is: L25000273494

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:

The word "consuLting" in the name of the LLC is misspelled in the articles because it is missing an L in the word consuLting. It is incorrectly spelled as "consuting" and needs to be corrected to add the L in consulting to the name.

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.

Garrett Panto Man. Member June 24, 2025
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)