M22 0000 131006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

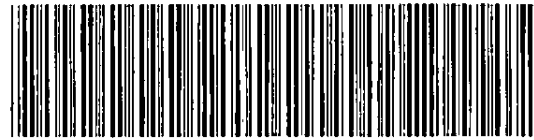Copies _____   Certificates of Status _____

Instructions to Filing Officer:

J. HORNE

MAY - 4 2023

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CT CORP
(850) 656- 4724
3558 lakesore Drive
Tallahassee, FL 32312

Date: _____05/03/2023_____

Acc#I20160000072

Name:	Schroth Safety Products LLC
Document #:	
Order #:	14916602 - 1

Certified Copy of Arts & Amend:	☐			
Plain Copy:	☐			
Certificate of Good Standing:	☐			
Certified Copy of	☐			
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Amount: $ 55.00

Thank you!

COVER LETTER

TO: Registration Section
        Division of Corporations

        Schroth Safety Products, LLC
SUBJECT: _____
                        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:

Jennifer Garberich, Paralegal
_____
            Name of Person

Benesch, Friedlander, Coplan & Aronoff, LLP
_____
            Firm/Company

200 Public Square, Suite 2300
_____
            Address

Cleveland, OH 44114
_____
        City/State and Zip Code

jgarberich@beneschlaw.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Garberich   216   363-6248
_____ at (_____) _____
        Name of Person   Area Code   Daytime Telephone Number

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                        Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ $25 Filing Fee   ☐ $30 Filing Fee &   ☐ $55 Filing Fee &   ☑ $60 Filing Fee,
                       Certificate of Status   Certified Copy   Certificate of Status &
                                                                       Certified Copy

CR2E062 (9/15)

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: Schroth Safety Products, LLC

SECOND: The Florida Document number of the limited liability company is: M22000013106

THIRD: Document to be corrected is: Application by Foreign LLC for authorization to transact business in FL

(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:

Scrivener's error in the legal name of the entity; should not have a comma.

1. Name of Foreign LLC: Schroth Safety Products LLC

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.

/s/ Michael Manella, Authorized Representative   5/3/2023

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.

Laura Broderick
Assistant Secretary

Registered Agent's Signature

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

CR2E062 (9/15)