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COVER LETTER

Division of Corporations
SUBJECT: BIG Life Coaching Practice LLC
(Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Articles of Correction and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeff Copper (Name of Person) DIG Life Capching Practice LLC (Firm/Company)
3/12 W. LAWN AVE. (Address)
TAMPA FL 336// (City/State and Zip Code)
For further information concerning this matter, please call:
Teff Coffer at (8/3) 786-5333 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\Bigcup \$30 Filing Fee & \Bigcup \$55 Filing Fee & \Bigcup \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is: BIG Life Coaching Practice LLC		
SECO:			
<u>(CH</u>	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEM	<u>1ENT</u>	
	Contains an incorrect statement. The incorrect statement, the reason the statement incorrect, and the corrected statement are as follows: I did Not type he Name of the company I type BIB Life Coaching Practice LLC.		1/2.
	The Name should be changed to:		
	DIG Life Coaching Practice LL	<u> </u>	
	OR All CAPS		
	Was defectively signed. The manner in which the document was defectively signed the appropriate correction are as follows:	ed and	
		·	
Dated:	October 26 .2006.		
	Signature of a member or authorized representative of a member		
	<u>Teff Copper</u> Typed or printed name of signee	90	γIO
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	06 0CT 30	DIVISION OF C