

10500009352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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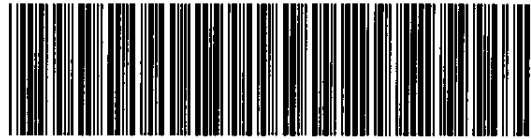
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2014 JUN 12 PM 12:10

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JUN 13 2014

J. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Florida Sunshine Shuttle, 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:

Dean A Gilvin  
Name of Person

Florida Sunshine Shuttle, LLC  
Firm/Company

255 Primera Blvd. Ste 160  
Address

Lake Mary Fl 32746  
City/State and Zip Code

dean@floridasunshineshuttle.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dean A. Gilvin at (407) 956-5400  
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
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

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 2014 JUN 12 PM 12:10  
 TALLAHASSEE, FLORIDA  
 DEPARTMENT OF STATE

**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: Florida Sunshine Shuttle, LLC

**SECOND:** The Florida Document number of the limited liability company is: L08000009352

**THIRD:** Document to be corrected is:  
Managing Member to Dean A Gilvin

**(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:

I recently changed my last name from Ciccarelli to Gilvin ,  
All other information remains the same.

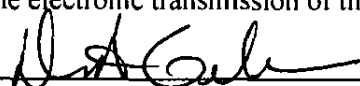
**OR**

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.

 6-2-14  
Signature of Authorized Representative Date

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2014 JUN 12 PM 12:10  
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**Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)**