

L12000070126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

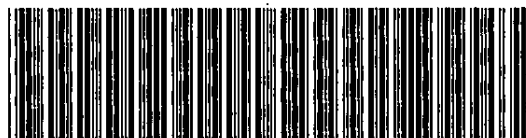
(Document Number)

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Special Instructions to Filing Officer:

Corrections

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2812 MAY 29 AM 9:42

FILED

J. SAULSBERRY  
EXAMINER

MAY 30 2012

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Red Boothe Circle Holdings, 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:

Amy Windmiller

Name of Person

Roetzel & Andress, LPA

Firm/Company

420 South Orange Avenue, 7th Floor

Address

Orlando, Florida 32801

City/State and Zip Code

awindmiller@ralaw.com

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 MAY 29 AM 9:42

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For further information concerning this matter, please call:

Amy Windmiller

Name of Person

at ( 407 )

245-2457  
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

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

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

**FIRST:** The name of the limited liability company is:  
Red Boothe Circle Holdings, LLC

**SECOND:** The articles of organization or the application to transact business

**(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 name of the Registered Agent is incorrect. The Registered  
Agent's current name is "Corporation Service Company (CSC)". The correct  
name of Registered Agent is "Corporation Service Company".

**OR**

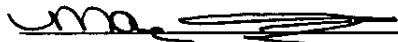
Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2012 MAY 29 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Dated: May 25, 2012, 2012

  
Signature of a member or authorized representative of a member

Mary-Beth T. Valley  
Typed or printed name of signee

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