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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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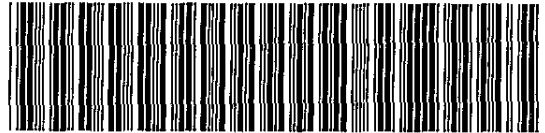
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
DEC 14 2008

**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:
Theodore Robert Kelly, Sr., L.L.C.

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:
Theodore Robert Kelly, Sr., L.L.C.

Typographical error-Theodore properly spelled Theodore

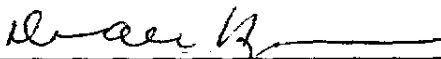
Theodore Robert Kelly, Sr., L.L.C.

OR

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC - 8 PM 4: 06

Dated: December 8, 2003


Signature of a member or authorized representative of a member

DON ALAN HYMAN

Typed or printed name of signee

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

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Theodore Robert Kelly, Sr., L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

30 Keerns Drive

Crawfordville, Florida 32327

Mailing Address:

30 Keerns Drive

Crawfordville, Florida 32327

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Theodore Robert Kelly, Sr.

Name

30 Keerns Drive

Florida street address (P.O. Box **NOT** acceptable)

Crawfordville, Florida 32327 FLORIDA

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 608, Florida Statutes..

Theodore Robert Kelly, Sr.

Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Theodore Robert Kelly, Sr.

30 Keerns Drive

Crawfordville, Florida 32327

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Theodore Robert Kelly, Sr.
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Theodore Robert Kelly, Sr.
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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