

LO4000077550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

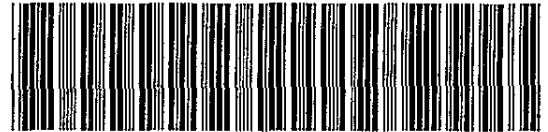
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF COURT  
PALM BEACH COUNTY, FLORIDA

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LO4-77550  
AL



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

November 10, 2004

JAMES HOJNACKI  
22976 LONE OAK DRIVE  
ESTERO, FL 33928

SUBJECT: FIDELITY INTEGRATED SYSTEMS, LLC  
Ref. Number: L04000077550

We have received your document for FIDELITY INTEGRATED SYSTEMS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 004A00064321

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fidelity Integrated Systems, LLC  
(Name of Corporation)

**DOCUMENT NUMBER:** L04000077550

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Hojnacki  
(Name of Person)

Fidelity Integrated Services, LLC  
(Name of Firm/Company)

22976 Lone Oak Drive  
(Address)

Estero, Florida 33928  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frances G. Boese at ( 239 ) 242-2697  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |
|--|--|
| <input type="checkbox"/> \$35.00 Filing Fee                  | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                            |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

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DIVISION OF STATE  
TALLAHASSEE, FLORIDA

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*Fidelity Integrated Services, LLC*  
22976 Lone Oak Drive  
Estero, Florida 33928

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November 29, 2004

Ms. Tammi Cline  
Document Specialist  
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**SUBJECT: Fidelity Integrated Systems, LLC**  
**Your Letter #004A00064321**

Dear Ms. Cline:


Per our conversation of last week, enclosed please find Articles of Correction for Fidelity Integrated Systems. As we discussed, I have filled out the Articles of Correction form for a Limited Liability Corporation. The correction needed is the name of the LLC. Please change to **Fidelity Integrated Services, LLC**.

Please return a stamped copy of Articles of Organization and Certificate of Status to the following:

Mr. James Hojnacki  
22976 Lone Oak Drive  
Estero, Florida 33928

A check was previously sent to you to cover the expense. If you have any further questions, please contact me at 239/242-2697. Thank you for your assistance.

Sincerely,

  
F.G. Boese  
Assistant to Mr. Hojnacki

/fgb  
enclosures

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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:  
FIDELITY INTEGRATED SYSTEMS, LLC

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

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

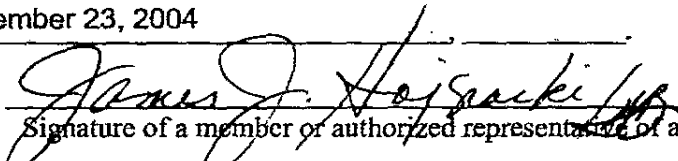
- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The name of the LLC is incorrect. Please amend to read FIDELITY  
INTEGRATED SERVICES, LLC.

**OR**

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

Dated: November 23, 2004

  
Signature of a member or authorized representative of a member  
James J. Homacki

Typed or printed name of signee

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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