## L05000058472

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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: Coastwide Capitol Management, LLC (Name of Co	orporation)		·
DOC	UMENT NUMBER: L05000058472			
The e	nclosed Articles of Correction and fee are s	submitted for filing.		
Please	e return all correspondence concerning this	matter to the following:		
	Theresa L. Weber (Name of	(Person)		
	KeWe UnLimited, Inc.		· · · · · · · · · · · · · · · · · · ·	_
2840	West Bay Drive, #288	m/Company)	2005 SECH TALL	<b></b>
Belleair Bluffs, FL. 33770  (City/State and Zip Code)  For further information concerning this matter, please call:		2005 JUL 14 P 2: 19 SECRETARY OF STATE ALLAHASSEE, FLORIDA	E E	
There	esa L. Weber at ( (Name of Person)	727 ) 647-8880 (Area Code & Daytime Telepi	ione Number)	
Enclo	sed is a check for the following amount:			
	□ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status		
	<b>☑</b> \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certified Copy	Certificate of S	Status &
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Street Addres Amendment S Division of Co 409 E. Gaines Tallahassee, F	ection orporations Street	



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 7, 2005

THERESA L. WEBER KEWE UNLIMITED, INC. 2840 WEST BAY DRIVE, #288 BELLEAIR BLUFFS, FL 33770

SUBJECT: COASTWIDE CAPITOL MANAGEMENT, LLC

Ref. Number: L05000058472

We have received your document for COASTWIDE CAPITOL MANAGEMENT, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong form. Please complete the attached form.

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) 245-6913.

Letter Number: 505A00045111

Diane Cushing Document Specialist

## 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.

FIRST: The name of the limited liability company is:  Coastwide Capitol Management, 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:					
mis-spelled the word (Capital) - Correct Spelling: Capital	_				
Coastwide Capital Management LC	ر -				
OR SECRE TO					
Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:					
ORIGATION OF THE PROPERTY OF T					
Dated:    Signature of a member or authorized representative of a member					
Filing Fee: \$25.00					

Certified Copy:

\$30.00 (optional)