

L05000087592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

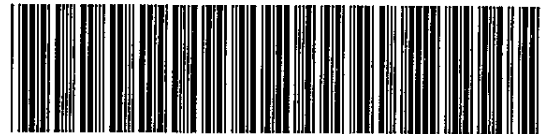
☐ PICK-UP☐ WAIT☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



500059193815

09/13/05--01007--016 **35.00

FILED

2005 SEP 13 P 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1	Age	
2	Availability	
3	Storage	
4	Media Writer	DCC
5	Updater	DCC
6	Updater	DCC
7	Updater	DCC
8	Updater	DCC
9	Updater	DCC
10	Updater	DCC
11	Updater	DCC
12	Updater	DCC
13	Updater	DCC
14	Updater	DCC
15	Updater	DCC
16	Updater	DCC
17	Updater	DCC
18	Updater	DCC
19	Updater	DCC
20	Updater	DCC
21	Updater	DCC
22	Updater	DCC
23	Updater	DCC
24	Updater	DCC
25	Updater	DCC
26	Updater	DCC
27	Updater	DCC
28	Updater	DCC
29	Updater	DCC
30	Updater	DCC
31	Updater	DCC
32	Updater	DCC
33	Updater	DCC
34	Updater	DCC
35	Updater	DCC
36	Updater	DCC
37	Updater	DCC
38	Updater	DCC
39	Updater	DCC
40	Updater	DCC
41	Updater	DCC
42	Updater	DCC
43	Updater	DCC
44	Updater	DCC
45	Updater	DCC
46	Updater	DCC
47	Updater	DCC
48	Updater	DCC
49	Updater	DCC
50	Updater	DCC
51	Updater	DCC
52	Updater	DCC
53	Updater	DCC
54	Updater	DCC
55	Updater	DCC
56	Updater	DCC
57	Updater	DCC
58	Updater	DCC
59	Updater	DCC
60	Updater	DCC
61	Updater	DCC
62	Updater	DCC
63	Updater	DCC
64	Updater	DCC
65	Updater	DCC
66	Updater	DCC
67	Updater	DCC
68	Updater	DCC
69	Updater	DCC
70	Updater	DCC
71	Updater	DCC
72	Updater	DCC
73	Updater	DCC
74	Updater	DCC
75	Updater	DCC
76	Updater	DCC
77	Updater	DCC
78	Updater	DCC
79	Updater	DCC
80	Updater	DCC
81	Updater	DCC
82	Updater	DCC
83	Updater	DCC
84	Updater	DCC
85	Updater	DCC
86	Updater	DCC
87	Updater	DCC
88	Updater	DCC
89	Updater	DCC
90	Updater	DCC
91	Updater	DCC
92	Updater	DCC
93	Updater	DCC
94	Updater	DCC
95	Updater	DCC
96	Updater	DCC
97	Updater	DCC
98	Updater	DCC
99	Updater	DCC
100	Updater	DCC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kirstin M. Marella, L.L.C.

(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:

Autumn Unsworth

(Name of Person)

Thomas G. Unsworth, P.A., C.P.A.

(Firm/Company)

3504 Radio Road

(Address)

Naples, Florida 34104-3721

(City/State and Zip Code)

For further information concerning this matter, please call:

Autumn Unsworth

(Name of Person)

at (239)

649-8111

(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

CR2E062 (08/05)

2005 SEP 13 P 3:57
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:
Kirstin M. Marella, 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:

The company name of the LLC was spelled incorrectly. The correct spelling of the
company name should be Kristin M. Marella, L.L.C.

OR

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

Dated: September 7, 2005

Kristin M. Marella

Signature of a member or authorized representative of a member

Kristin M. Marella

Typed or printed name of signee

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

2005 SEP 13 P 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED