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2006 MAR 21 P 2:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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TO: Registration Section  
Division of Corporations

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: GALVANO, 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:

RICHARD GALVANO  
(Name of Person)

GALVANO, LLC  
(Firm/Company)

21911 CROWN LAKE BOULEVARD  
(Address)

BONITA SPRINGS, FL 34135  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBIN GALVANO at (239) 707-9805  
(Name of Person) (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

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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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FIRST:** The name of the limited liability company is: GALVANO, 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:

Please change "Manager/Member Detail"  
from Galvano Group, LLC to  
RICHARD GALVANO, MGR.

**OR**

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

Dated: March 8, 2006

[Signature]  
Signature of a member or authorized representative of a member

Robin Galvano

Typed or printed name of signee

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