## 

	SECRETARY OF TALLAHASSEE, FLO
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## **COVER LETTER**

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	COVERLETTE	R	EU
TO: Registration Section Division of Corporations		200b MAR 21	P 2: 20
SUBJECT: Galvani	Roofing, i	SECRETARY TALLAHASSEE	OF STATE
(Na	me of Limited Liability Co	ompany)	LONIUA
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	ng:	
RICHPRD GAV (Name of Person)  Galvano Roofin (Firm/Company)  27911 Crown Lake (Address)	g,uc		
Bonita Springs, F	1 34135 de)	_	
For further information concerning this mat	ter, please call:		
Robin Galvano (Name of Person)	at (239 (Area Code	701.9805 & Daytime Telephone Number)	<del></del>
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 amo	unt:		
\$25 Filing Fee \$25 State \$30 Filing Fee & Certificate of State	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

## ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY LED

Pursua busine	nt to section 608.4115, F.S., this document is being submitted within the required 30 2: 20 ss days to correct the attached articles of organization or application to transact business
in Flor	ida. SECRETARY OF STATE TALLAHASSEE, FLORIDA
SECO	ND: The articles of organization or the application to transact business  IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
X	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, uc to Richard Galvano, Mg
	OR  Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
Dated:	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)