

L060000 75121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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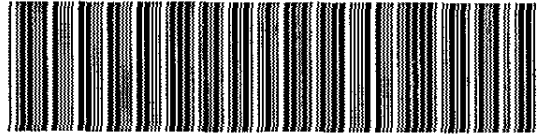
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AIRMOVERS, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Donald Lee

(Name of Person)

Airmovers, LLC

(Firm/Company)

P.O. Box 2345

(Address)

Silver Springs, FL 34489

(City/State and Zip Code)

For further information concerning this matter, please call:

John Q. Adams II, CPA

(Name of Person)

at ( 352 ) 237-3200

(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)

FILED  
06 AUG 17 PM 12:26  
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:  
AIRMOVERS, LLC

LOG000075121

**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:

ARTICLE V: delete managing members/managers street number "13396" and replace with "11396"

ARTICLE II and ARTICLE IV- delete street address zip code "34489" and replace with "34488".

ARTICLE II: delete mailing address zip code "34488" and replace with "34489".

ARTICLE V: delete managing members/managers zip code "34489" and replace with "34488"

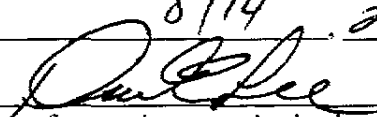
**OR**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: \_\_\_\_\_

8/14 2006

  
Signature of a member or authorized representative of a member

Donald Lee

\_\_\_\_\_  
Typed or printed name of signee

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

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06 AUG 17 PM 12:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L06000075121  
FILED 8:00 AM  
July 28, 2006  
Sec. Of State  
tcline

**Article I**

The name of the Limited Liability Company is:  
AIRMOVERS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
11396 NE 40TH STREET ROAD  
SILVER SPRINGS, FL. US 34489

The mailing address of the Limited Liability Company is:  
P.O. BOX 2345  
SILVER SPRINGS, FL. US 34488

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
DONALD LEE  
13396 NE 40TH STREET ROAD  
SILVER SPRINGS, FL. 34489

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DONALD LEE

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
DONALD LEE  
13396 NE 40TH STREET ROAD  
SILVER SPRINGS, FL. 34489 US

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July 28, 2006  
Sec. Of State  
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### **Article VI**

The effective date for this Limited Liability Company shall be:

07/28/2006

Signature of member or an authorized representative of a member

Signature: DONALD LEE

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TALLAHASSEE, FLORIDA