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SECRETARY OF STATE ALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration : Division of C				
SUBJECT: SY HC	DLDINGS, LLC			_
	(Name	of Limited Liability Co	ompany)	
Dear Sir or Madam:				
The enclosed Articles	of Correction and fee(s) a	are submitted for filing.		
Please return all corres	spondence concerning this	s matter to the following	ag:	
JERALD R. PIT	KIN, ESQ.	·	TA 2	
	(Name of Person)		SECR ALLA	•
PAULICH, SLACE	( & WOLFF, P.A. (Firm/Company)		HASS	
5147 CASTELLO			SECRETARY OF STATE ALLAHASSEE, FLORIDA	, ]
	(Address)		TATE	ب د <b>د</b>
NAPLES, FL 341	03 (City/State and Zip Code)		_	
For further information	n concerning this matter,	please call:		
JERALD R. PITKIN (Nan	N, ESQ. ne of Person)	at ( 239 (Area Code &	261-0544 & Daytime Telephone Number)	_
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ons r Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for	or the following amount:	:		
2 \$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)

## 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.

<u>FIRST</u>	The name of the limited liability company is: SY HOLDINGS, LLC							
SECO.	ND: The articles of organization or the application to transact business							
<u>(CH</u>	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u> FATEMI</u>	<u>ent</u>					
<b>7</b>	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  MANAGER/MEMBER DETAIL: The following Manager/Member was omitted.							
	Please add the following as the second Manager/Member:							
	Yoke, Scott A.	700						
	6921 Sandalwood Lane, Naples, FL 34109	SEP	T					
	OR SEE. T	<u>Б</u> О						
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	ly signed	and					
Dated:	September 48 , 2006							
	Signature of a member or authorized representative of a member							
	Jerald R. Pitkin, Esq.							
	Typed or printed name of signee							
	Filing Fee: \$25.00							

Certified Copy:

\$30.00 (optional)