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## **COVER LETTER**

TO: Registration Section Division of Corporations	- ·			
SUBJECT: Scarlet Developmen	15 4C			
(Name of Limited Liability Company)				
Dear Sir or Madam:	٠.			
The enclosed Articles of Correction and fee(s) are submitted for filling	,			
Please return all correspondence concerning this matter to the following	ng:			
Panka's Patel (Name of Person)				
(Firm/Company)	<b>-</b>			
28 Falcwild (Address)	ZOOL OCT - SECRETAL SECRETAL			
Clearwater, Fl 33767 (City/State and Zip Code)	OCT -2 P 2: WHASSEE, FLOR			
For further information concerning this matter, please call:				
Vankaj Patel at (727) 365-9049 (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 \$\Bullet\$ \$30 Filing Fee & \$\Bullet\$ \$55 Filing Fee & Certificate of Status \$\Bullet\$ 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.

FIRST	The name of the limited liability company is: Scarlet Developments L	L
SECO	ND: The articles of organization or the application to transact business  IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
Image: section of the content of the	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: <u>remove MGRM Reland Rogers</u> <u>replace with Shivam Patel nis address</u> 15-28 Falewild, Clearusath F133767	
	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  Pankai Pakl	

Typed or printed name of signee

\$25.00

\$30.00 (optional)

Filing Fee:

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