

LD6000092677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

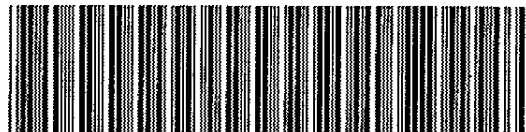
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT 25 PM 4:30

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dead By Friday, 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:

Lauren M. Ilvento, Esq.

(Name of Person)

The Draves Law Firm, P.A.

(Firm/Company)

120 East Concord Street

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Lauren M. Ilvento, Esq.

(Name of Person)

at ( 407 ) 423-1183

(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)

**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:  
Dead By Friday, 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:

\_\_\_\_\_

The zip code of the mailing address, principal office and Manager of the Company is incorrectly  
stated. The correct zip code is 32837.

**OR**

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

Dated: Oct 29, 06

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Stacey Drier

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

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT 25 PM 4:30