

W 7000008259

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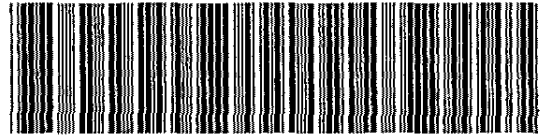
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W 7000008259



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 7, 2007

DANA M. SANTINO, ESQ  
KENNEDY TRINLEY, ET AL. P.L.  
1675 PALM BEACH LAKES BLVD, STE 700  
WEST PALM BEACH, FL 33401

SUBJECT: ZOLTAR SYSTEMS, LLC  
Ref. Number: L07000008259

We have received your document for ZOLTAR SYSTEMS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 907A00009291

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TALLAHASSEE, FLORIDA

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**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:  
ZOLTAR SYSTEMS, 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:

See Attached Exhibit "A"

**OR**

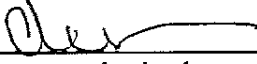
- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Dated: JANUARY 29, 2007

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

DANA M. SANTINO, ESQ., AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

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

**EXHIBIT "A"**

The incorrect statement is

"Article II

The street and address of the principal office of the Limited Liability Company is:

825 U.S. Highway One South  
Jupiter, FL 33477

The mailing address of the Limited Liability Company is:

825 U.S. Highway One South  
Jupiter, FL 33477".

This statement is incorrect because the street and mailing address are not the correct addresses.

The correct statement is

"Article II

The street address of the principal office of the Limited Liability Company is:

825 South U.S. Highway One  
Suite 100  
Jupiter, FL 33477

The mailing address of the Limited Liability Company is:

825 South U.S. Highway One  
Suite 100  
Jupiter, FL 33477".

The incorrect statement is

"Article IV

The name and Florida street address of the registered agent is:

WILLIAM PAGE  
825 U.S. Highway One South  
Jupiter, FL 33477".

This statement is incorrect because the Florida street address is not the correct address.

The correct statement is

"Article IV

WILLIAM PAGE  
825 South U.S. Highway One  
Suite 100  
Jupiter, FL 33477".

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TALLAHASSEE, FLORIDA

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