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| (Re | equestor's Name) | | | | |
|-------------------------|--------------------|-----------------|--|--|--|
| (Address) | | | | | |
| (Ad | ldress) | | | | |
| (Cit | ty/State/Zip/Phone | ; #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to | Filing Officer: | | | | |
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09/24/07--01008--014 **25.00

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| SUBJECT: SETA SUPPORT SERVICE ALLIANCE, LLC | | | | | | |
| (Name of Limited Liability Company) | | | | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed Articles of Correction and fee(s) are submitted for f | īling. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| YASMIN TIRADO-CHIODINI, ESQ. (Name of Person) | de Control des | | | | | |
| TIRADO-CHIODINI, PL (Firm/Company) | | | | | | |
| 1621 BARR ST. (Address) | | | | | | |
| OVIEDO, FL 32765 (City/State and Zip Code) For further information concerning this matter, please call: | | | | | | |
| YASMIN TIRADO-CHIODINI, ESQ. at (407) 977-7366 | | | | | | |
| (Name of Person) (Area C 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 & ☐ \$55 Filing Fe Certificate of Status ☐ Certified Cop | | | | | | |

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 | s: SETA SUPPA | ORT SERVICE | FALLIANCE,LLC |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------|---------------------------------|
| SECO: | ND: The articles of organization or the application | on to transact busines | SS | _ |
| <u>(CH</u> | ECK THE APPROPRIATE BOX AND COMPLETE | E THE APPLICABL | E STATEMENT | |
| Ø | Contains an incorrect statement. The incorrect state incorrect, and the corrected statement are as follow: INCORRECT STATEMENT: CURRENT NAME IS- SE | s: | | <u>2</u> |
| | CORRECTED STATEMENT: NAME SHOULD BE - SET | TA SUPPORT SERVIC | ES ALLIANCE, LL | <u>2</u> |
| | (*NOTE THAT IN THE CORRECTION A LETTER "S" IS ADDED TO THE V | WORD "SERVICE" MAKING I | T "SERVICES" INSTEAD | <u>).</u> |
| | | v-1 | | _ |
| | <u>OR</u> | | | |
| | Was defectively signed. The manner in which the of the appropriate correction are as follows: | document was defect | tively signed and | |
| | | | | - |
| | | | | _ |
| | | | | va |
| Dated: | SEPTEMBER 18/ 200 | 7 . | | - |
| | Yanuin (iva do- C | drodi | | DIVIS BIVIS |
| | Signature of a member or authorized repre | esentative of a memb | per ; | FILE ECRETARY ISION OF CO |
| | YASMIN TIRADO-CHIODINI, ESQ. | | | ARY F CC |
| • | Typed or printed name of | signee | | PH DEFE |
| | | 5.00 0.00 (optional) | | TAIL PATIONS |