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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT: Dam	ation Group LLC		
	(Name o	f Limited Liability Cor	npany)
Dear Sir or Madam:			
The enclosed Articles	of Correction and fee(s) as	re submitted for filing.	
Please return all corre	espondence concerning this	matter to the following	g:
Bruce Maguire			_
	(Name of Person)		
Dalmation Group			_
	(Firm/Company)		
1 Dolphin Drive			_
	(Address)		_
St. Augustine, Fl	L 32080		
	(City/State and Zip Code)		-
For further information	on concerning this matter, p	lease call:	
Bruce Maguire		at (904	669-3059
(Na	me of Person)	(Area Code &	& Daytime Telephone Number)
STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, Florida 3 Enclosed is a check	ions er Circl <b>c</b>		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
☑ \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	□\$60 Filing Fee, Certificate of Status & Certified Copy

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#### ARTICLES OF CORRECTION **FOR**

FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

TALL AHATE

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 FLORIDA

business days to correct the attached articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is:  Dalmation Group LLC				
SECO					
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT				
V	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
	Damatian Group LLC was incorrectly spelled.				
	The "I" was left out and "tian" should have been "tion".				
	The correct name is Dalmation Group LLC. Please correct our error. Thank you.				
	OR  Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
Dated:	July 22 , 2008 .  X Signature of a member or authorized representative of a member				
	Bruce Maguire				
	Typed or printed name of signee				
	Filing Fee: \$25.00				

Certified Copy:

\$30.00 (optional)

# Electronic Articles of Organization For Florida Limited Liability Company

L08000061465 FILED 8:00 AM June 23, 2008 Sec. Of State ncausseaux

#### **Article I**

The name of the Limited Liability Company is: DALMATION GROUP, LLC

#### Article II

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

1 DOLPHIN DRIVE ST. AUGUSTINE, FL. US 32080

The mailing address of the Limited Liability Company is:

1 DOLPHIN DRIVE ST. AUGUSTINE, FL. US 32080

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

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

MAGUIRE & ASSOCIATES, INC. 1 DOLPHIN DRIVE ST. AUGUSTINE, FL. 32080

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: BRUCE MAGUIRE

# Article V

The name and address of managing members/managers are:

Title: MGRM BRUCE MAGUIRE 1 DOLPHIN DRIVE ST. AUGUSTINE, FL. 32080 US L08000061465 FILED 8:00 AM June 23, 2008 Sec. Of State ncausseaux

### **Article VI**

The effective date for this Limited Liability Company shall be: 07/01/2008

Signature of member or an authorized representative of a member Signature: BRUCE MAGUIRE