L0800007512

(Requestor's Name)
(Address)
(Address)
•
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Desument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000135113730

09/03/08--01020--008 **30.00

08 SEP -3 AN II: 5: SECRETARY OF STATE

T. HAMPTON
SEP - 4 2008

EXAMINER

COVER LETTER

	tration Section on of Corporations				
SUBJECT:	SCOTT E. WILKINS, LLC				
(Name of Limited Liability Company)					
Dear Sir or Ma	dam:				
The enclosed	Articles of Correction and fee(s) are subr	nitted for filing.			
Please return a	Il correspondence concerning this matter	to the following:			
LORRIE V					
	(Name of Person)				
	(Firm Company)				
	(ram Company)				
2360A HER					
	(Address)				
CHIPLEY, I					
	(City State and Zip Code)				
For further inf	ormation concerning this matter, please of	eall:			
LORRIE WI	_KINS	at (850) 258-9771			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Registration S Division of Co Clifton Buildin	rporations ag e Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a	check for the following amount:				
□ \$25 Filing l		55 Filing Fee & S60 Filing Fee, ertified Copy 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: SCOTT E. WILKINS, LLC				
SECO	ND: The articles of organization or the application to transact busine IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE				
	ains an incorrect statement. The incorrect statement, the reason the statement is crect, and the corrected statement are as follows:				
	NAME IS INCORRECT. IT SHOULD READ AS FOLLOWS: EDWARD S. V	NILKINS, LLC			
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defective appropriate correction are as follows:	ctively signed and			
Dated:	SEPTEMBER 2 2008				
	Signature of a member or authorized representative of a mem	TALL,			
	LORRIE J WILKINS	AHAS AHAS			
	Typed or printed name of signee	SEE. 3			
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	FLORI			

Electronic Articles of Organization For Florida Limited Liability Company

L08000079512 FILED 8:00 AM August 19, 2008 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is: SCOTT E. WILKINS, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 1520 LOUISIANA AVE. ST. CLOUD, FL. US 34769

The mailing address of the Limited Liability Company is: 2360A HERRING RD. CHIPLEY, FL. US 32428

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:

LORRIE J WILKINS 2360A HERRING RD. CHIPLEY, FL. 32428

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: LORRIE J WILKINS



Article V

The name and address of managing members/managers are:

Title: MGR LORRIE J WILKINS 2360A HERRING RD. CHIPLEY, FL. 32428 US

Title: MGR FRANK D WILKINS 2360A HERRING RD. CHIPLEY, FL. 32428 US

Article VI

The effective date for this Limited Liability Company shall be: 08/19/2008

Signature of member or an authorized representative of a member Signature: LORRIE J WILKINS

L08000079512 FILED 8:00 AM August 19, 2008 Sec. Of State nculligan

OB SEP -3 AN II: 55
SECRETARY OF STATE
TALLAHASSEE F. STATE