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The Law Offices of

Snyder & Snyder, P.A.

Attorneys and Counselors at Law

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ANNE J. McPHEE, J.D., LL.M.

KRISTIN L. SNYDER, J.D.

November 12, 2008

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: LEVI CIELO FALLS, LLC

Dear Sir/Madam:

Please find enclosed Articles of Correction for the above-referenced LLC. In addition, enclosed please find a firm check in the amount of \$25.00, representing the filing fee.

Thank you for your attention to this matter. Should you have any questions, please do not hesitate to contact me directly.

Very truly yours,

SNYDER & SNYDER, P.A.

Anne J. McPhee

AJM:rg Encls.

COVER LETTER

TO:	Registration Division of	Section Corporations		
SUBJE	ct: LEVI	CIELO FALLS, LLC		
			f Limited Liability Cor	mpany)
Dear Si	r or Madam:			
The end	closed Article	s of Correction and fee(s) a	re submitted for filing.	
Please 1	return all corr	espondence concerning this	matter to the following	g:
ANNI	E J. MCP	HEE, ESQ.		_
		(Name of Person)		_
SNYD	ER & SNY	DER PA		
		(Firm/Company)		_
7931	S.W. 45TH	STREET		_
		(Address)		
DAVIE	E, FLORID	A 33328		
		(City/State and Zip Code)		_
For fur	ther informati	on concerning this matter, p	olease call:	
ANNE	J. MCPHE	E	at (_954	, 475-1139, EXT. 5
	(N	ame of Person)	(Area Code &	Daytime Telephone Number)
Registra Divisio Clifton 2661 E	ET/COURIE ation Section n of Corporat Building xecutive Cent ssee, Florida	er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclose	ed is a check	for the following amount:		
2 \$25	Filing Fee	\$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

TO:

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 LEVI CIE	: The name of the LO FALLS, LLC	limited liability comp	oany is:		 			
SECO!	ND: The articles of o	rganization or the app	olication to transact busine	:SS				
(<u>CH</u>	ECK THE APPROPRIA	ATE BOX AND COMI	PLETE THE APPLICABL	E STATEME	<u>NT</u>			
V	Contains an incorrect statement. The incorrect statement, the reason the statem incorrect, and the corrected statement are as follows: THE PRINCIPAL OFFICE ADDRESS AND REGISTERED AGENT'S ADDRESS ARE INCO							
	THE CORRECT ADDRES	S FOR THE STREET & I	MAILING ADDRESS OF THE	PRINCIPAL O	FFICE			
	AND REGISTERED AGE	ENT IS: 1451 SOUTH N	MIAMI AVE., APT. 2802, MI	AMI, FL 33130				
	OR Was defectively signed the appropriate correction		h the document was defec	tively signed	and			
Dated:	NOVEMBER 12		2008					
	an) HEE	d representative of a mem	SECAETARY. TALLAHASSEE	1 11 AON 80			
		Typed or printed na Filing Fee: Certified Copy:	me of signee \$25.00 \$30.00 (optional)	JE STATE EFLORIDA	AM 8: 09			