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(Re	(Requestor's Name)					
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PICK-UP	WAIT	MAIL				
						
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Certified Copies	Certificates	s of Status				
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SECRETARY OF STATE
TALLAHASSEE. FLORIC

T. CLINE

FEB 2 6 2009

EXAMINER

09-11238

COVER LETTER

	ration Section on of Corporations				
SUBJECT: N	Nor-Mel15 LLC				
	(Name o	of Limited Liability Co	mpany)		
Dear Sir or Ma	dam:				
The enclosed A	Articles of Correction and fee(s) a	are submitted for filing.			
Please return a	Il correspondence concerning this	s matter to the followin	g:		
Jack B. Me	elton			•	
	(Name of Person)		-		
MorMel-15 l	1.0				
MOUNTEL 13	(Firm/Company)		-		
				70 20	
9429 Poinci	PTP		<u></u>		Post Tale
	(Address)			2000 FEB SECRET	1.2
Fort Pierce	FL 34951			25 AR) ASS	10 mm 17 mm 18
1011110100	(City/State and Zip Code)		_		
For further info	ormation concerning this matter,	please call:		AMIO: 40 OF STATE E. FLORID	Meny by
Jack B. Melte	on	at (772	468-9941	Ş., 0	
	(Name of Person)		& Daytime Telephone Number)		
STREET/COI Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations ig 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 F	Tee □ \$30 Filing Fee & Certificate of Status	✓ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, 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 Mor-Mel1	-	The name of the lin	nited liability cor	mpany is:				
SECO	<u>ND</u> :	The articles of orga	nization or the ap	pplication to transact bu	usiness			
<u>(CH</u>	IECK T	<u>HE APPROPRIATE</u>	E BOX AND COM	<u> 1PLETE THE APPLIC</u>	ABLE STATEMENT			
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:							
	The na	The name of the LLC should be MorMel-15 LLC, not Mor-Mel15 LLC as was originally issued.						
Please correct the name to MorMel-15 LLC.								
	<u>OR</u>				200° 7.4.L			
		efectively signed. To propriate correction		ich the document was d	lefectively signed and			
					EC A			
					O: 40 ORNIA			
		· · · · · · · · · · · · · · · · · · ·						
Dated:	Febru	ary 16		_, _2009				
	Signature of a member or authorized representative of a member							
		Jack B. Melton		•				
			yped or printed r	name of signee				
			Filing Fee:	\$25.00				

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L09000011238 FILED 8:00 AM February 03, 2009 Sec. Of State dbruce

Article I

The name of the Limited Liability Company is: MOR-MEL15 LLC

Article II

The street address of the principal office of the Limited Liability Company is: 9429 POINCIANA COURT FORT PIERCE, FL. 34951

The mailing address of the Limited Liability Company is:

9429 POINCIANA COURT FORT PIERCE, FL. 34951

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:

JACK B MELTON 9429 POINCIANA COURT FORT PIERCE, FL. 34951

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: JACK B. MELTON

Article V

The name and address of managing members/managers are:

Title: MGRM JACK B MELTON 9429 POINCIANA COURT FORT PIERCE, FL. 34951

Title: MGRM MICHAEL C MELTON 9429 POINCIANA COURT FORT PIERCE, FL. 34951

Signature of member or an authorized representative of a member

Signature: MAGGIE WANG

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