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C. LEWIS

JUL 1 6 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: R.D.G. ELECTRICAL L.L.C.
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Articles of Correction and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
RAZVAN D. GHEORGHE Name of Person
R.D.G. ELECTRICAL LLC.
18469 GERANIUM RD.
FORT MYERS, FL, 33967 City/State and Zip Code
E-mail address: (to be used for fliture annual report notification)
For further information concerning this matter, please call:
RAZVAN D. GHEORGHE at (239) 671-4415 Name of Person Area Code & Daytime Telephone Number
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 \$\times \text{S55 Filing Fee & Certificate of Status}\$\$ Certified Copy \$\$ \$60 Filing Fee, \$\$ Certified Copy \$\$ Certified Copy

CR2E062 (08/05)

	ARTICLES OF CORRECTION FOR ORIDA OR FOREIGN LIMITED LIABILITY COMPANY 2009 11.	
FLO	LORIDA OR FOREIGN LIMITED LIABILITY COMPANY 2019 JULY	
Pursuant to section business days to coin Florida.	FOR LORIDA OR FOREIGN LIMITED LIABILITY COMPANY 15 PH 12: 38 correct the attached articles of organization or application to transact business of STATE 15 PH 12: 38	
FIRST: The	e name of the limited liability company is: RD, G, ELECTRICAL L.L.C.	
SECOND: The	e articles of organization or the application to transact business	
(CHECK THE A	APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
incorrect, ar	n incorrect statement. The incorrect statement, the reason the statement is and the corrected statement are as follows: 2RECT STATEMENT IS AT MANAGEMENT MEMBERS	,
1677 74	ie Space blank, so the correct statemen	4
s there	the management wember is RAZVAN D = 18469 GERAXIIUM RD, FORT MYERS, FC. 33	,
2 HEOR GHZ	= 18469 GERALIUM RD FORT HYERS FC 33	- 96
OR Was defecti	tively signed. The manner in which the document was defectively signed and riate correction are as follows:	
Sig	Signature of a member or authorized representative of a member CAZVAN D. GHEDRGHZ Typed or printed name of signee Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

CR2E062 (08/05)