

L09000077547

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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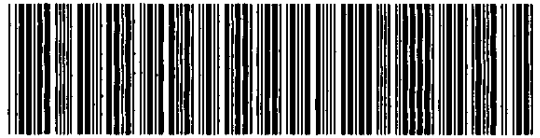
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G. MCLEOD

OCT 15 2009

EXAMINER



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10/14/09--01006--007 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
09 OCT 14 PM 12:54

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** G & M Enterprises of Jacksonville, LLC

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:

Mr. Greg Carter

Name of Person

G & M Enterprises of Jacksonville, LLC

Firm/Company

1865 Salt Mrytle Drive

Address

Fleming Island, FL 32203

City/State and Zip Code

cartershme@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mr. Greg Carter

Name of Person

at ( 904 )

838-6926

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    ☐ \$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 **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

**FIRST:**      The name of the limited liability company is:  
                                 G & M Enterprises of Jacksonville, LLC

**SECOND:**      The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The original document lists Marlene Smith as a Member. Marlene Smith should  
not have been listed as a member, she performs services for the LLC but is not  
part of the Membership. Please remove Marlene Smith from the documents as a  
Member. The sold Member listed should be Greg Carter Member-Manager.

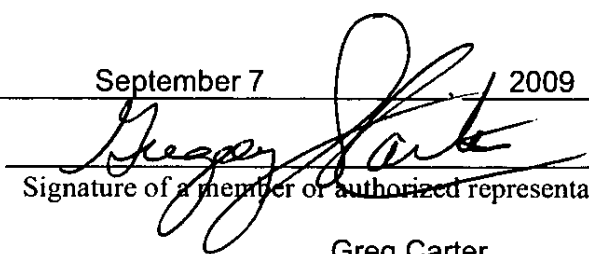
**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: September 7 2009

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Greg Carter

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee:                      \$25.00**  
**Certified Copy:              \$30.00 (optional)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
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