Florida Department of State

Division of Corporations Public Access System

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To:

SEP 21 2009

Division of Corporations

Fax Number : (850)617-6383

EXAMINER

Account Name

: SALVATORI & WOOD, BUCKEL & WEIDENMILLER, PL

Account Number : I20030000112 Phone

: (239)552-4100

Fax Number

: (239)649-1706

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MARISSA PROPERTIES, LLC

Certificate of Status Certified Copy 03 Page Count \$25.00 Estimated Charge Corporate Filing Menu Electronic Filing Menu

COVER LETTER

TO:	Registration of	on Section f Corporations						
SUBJE	СТ:	Mai	rissa Prope	erties.	LLC	<u>-</u>		
		Name	of Limited Liabi	lity Com	рапу			
Dear S	ir or Madam:	:						
The en	closed Articl	es of Correction and fee(s)	are submitted for	filing.				
Please	return all cor	respondence concerning thi	s matter to the fo	ollowing:	:			
		Leo J. Salvatori						
		Name of Person						
	Salvato	ri, Wood, Buckel & W	eidenmiller					
		Firm/Company						
	913	2 Strada Place - Four	th Floor					
		Address						
		Naples, FL 34108)					
		City/State and Zip Code	<u>'</u>		•			
	moll address	SCS@SWbW-law.co: s: (to be used for future ann	m	intion)				
£	-10an econes	s: (to be used for think whi	uai report noutic	auon)				
For fur	ther informat	tion concerning this matter,	please call:					
	Le	eo J. Salvatori	at (2	239 _)	552-4100			
		ame of Person	** \	Area Cod	e & Daytime Telephone Number			
Registr Divisio Clifton 2661 E	ET/COURIF ation Section n of Corpora Building xecutive Cer ssee, Florida	ntions nter Circle)]]	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	S TA	_	
Enclos	ed is a check	k for the following amount	:			ALC:	09 S	
5 25	Filing Fee	✓ \$30 Filing Fee & Certificate of Status	\$55 Filing Certified C		\$60 Fiting Fee, Certificate of Status & Certified Copy	RETARY I	SEP 18 1	
CR2E0	62 (08/05)					OF STA	AM 8: €	

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	<u>. </u>	The name of the li	mited liability com Marissa Prop	pany is: perties, LLC							
SECO	<u>ND</u> :	The articles of org	anization or the app	plication to transact busines	s						
(CH	ECK T	<u>HE APPROPRIAT</u>	E BOX AND COMI	PLETE THE APPLICABLE	STATEMENT						
√	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The name of the limited liability company is: Marisa Properties, LLC										
	Article V - The name and address of the initial managers are as follows:										
	Jitesh Patel and Smita Patel, 531 Bentley Place, Tucker, GA 30084										
	OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:										
											
Dated:					er SE						
			••	me or signee	도 유 						
			Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	18 ASSI						
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