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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

	on Section of Corporations	
SUBJECT:	AMAR CAPTIVA	, LLC
- 5.	Name of Limited Liability Co	ompany
Dear Sir or Madam	::	
The enclosed Artic	les of Correction and fee(s) are submitted for filing	
Please return all co	rrespondence concerning this matter to the following	ng:
<u></u>	MOTHY J. MURTY, ESQ.	-
	MURTY & MONK, P.A.	
	Firm/Company	_
1633	PERIWINKLE WAY, SUITE A Address	_
	SANIBEL, FL 33957 City/State and Zip Code	_
TIN E-mail addres	IMURTY@EARTHLINK.NET s: (to be used for future annual report notification)	_
For further informa	tion concerning this matter, please call:	
	HY J. MURTY, ESQ. at (239	472-1000
N	ame of Person Area Co	ode & Daytime Telephone Number
STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check	k for the following amount:	
\$25 Filing Fee	\$30 Filing Fee & S55 Filing Fee & Certificate of Status 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.

<u>FIRST</u>	$\underline{\Gamma}$: The national	ame of the l	imited liability cor AMAR CA	mpany is: PTIVA, LLC	>			_		
<u>SECO</u>	ND: The ar	ticles of org	ganization or the a	pplication to ti	ransact business					
(CH	ECK THE AP	PROPRIAT	<u>'E BOX AND CON</u>	<u> MPLETE THE</u>	APPLICABLE S	TATE	<u>MENT</u>	•		
\checkmark	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:									
	ARTICLE V	MGRM, D	avid A. William					_		
	scrivener's e	rror								
	David A. Wil	liams						_		
	<u>OR</u>									
			The manner in whare as follows:	ich the docum	ent was defective	ely sign	ed and	i 		
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Dated:	J	anuary 26,	2010	_, 2010						
		time to	That							
	Sign	ature of alm	ember or authoriz	ed representat	ive of a member	ZSE	5			
	TIMOTHY J. MURTY, ESQ.					CRE AA	JAK	7		
	Typed or printed name of signee						129			
			Filing Fee: Certified Copy:	\$25.00 \$30.00 (o	ptional)	Y OF ST	P X 3:			