

L10000013474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

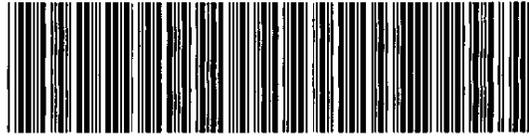
Special Instructions to Filing Officer:

**L. SELLERS**

FEB 22 2010

**EXAMINER**

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02/10/10--01007---009 \*\*25.00

**FILED**  
10 FEB 19 PM 4:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Low Fliers 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:

Patt C Corbin  
Name of Person

Low Fliers LLC  
Firm/Company

PO Box 8405  
Address

Amelia Island, FL 32035  
City/State and Zip Code

PattCC@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patt C Corbin at ( 904 ) 321 0637  
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
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 11, 2010

PATT C. CORBIN  
P.O. BOX 8405  
AMELIA ISLAND, FL 32035

SUBJECT: LOW FLIERS LLC  
Ref. Number: L10000013474

We have received your document for LOW FLIERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 610A00003559

**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:

LOW FLEETS 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:  
article V mis typed

3rd member incorrect name - should read -

(1st name) Katherine (middle initial) E. (last name) Brown

**OR**

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

Dated: Feb 19, 2010

Patt C Corbin

Signature of a member or authorized representative of a member

Patt C Corbin

Typed or printed name of signee

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