

L11000014674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED
11 FEB 10 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

FEB 11 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2011

DAVID T MCCLELLAN
5361 SE 28TH STREET
OCALA, FL 34480

SUBJECT: MCCLELLAN ENTERPRISES LLC
Ref. Number: L11000014674

FILED
11 FEB 10 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MCCLELLAN ENTERPRISES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #F73391, M. & T. ENTERPRISES, INC..

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 611A00003250

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McClellan Enterprises, 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:

David T McClellan

Name of Person

Firm/Company

5361 SE 28TH STREET

Address

OCALA, FL 34480

City/State and Zip Code

DAVIDMC386@AOL.COM

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

FILED
11 FEB 10 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DAVID T MCCLELLAN

Name of Person

at (352)

843-5106

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:
McClellan Enterprises 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:

An addition for a MGR is requested as follows: Bruce Taylor

6977 Old Brentford Rd Alexandria, VA 22310

OR



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

Dated: February 4, 2011

David T. McClellan
Signature of a member or authorized representative of a member

DAVID T MCCLELLAN

Typed or printed name of signee

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

FILED
11 FEB 10 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L11000014674
FILED 8:00 AM
February 03, 2011
Sec. Of State
clewis

Article I

The name of the Limited Liability Company is:
MCCLELLAN ENTERPRISES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1540 SW 5TH AVE
OCALA, FL. 34471

The mailing address of the Limited Liability Company is:
5361 SE 28TH ST
OCALA, FL. 34480

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
DAVID T MCCLELLAN
5361 SE 28TH ST
OCALA, FL. 34480

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: DAVID T MCCLELLAN

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11 FEB 10 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V

The name and address of managing members/managers are:

Title: MGRM
DAVID T MCCLELLAN
5361 SE 28TH ST
OCALA, FL. 34480

Title: MGRM
LAURIE A MCCLELLAN
5361 SE 28TH STREET
OCALA, FL. 34480

L11000014674
FILED 8:00 AM
February 03, 2011
Sec. Of State
clewis

Article VI

The effective date for this Limited Liability Company shall be:

02/07/2011

Signature of member or an authorized representative of a member

Electronic Signature: DAVID T MCCLELLAN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

FILED
11 FEB 10 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA