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T. HAMPTON  
APR 18 2011  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** First Coast Fusion Cheer and Dance, 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:

Dale S. Wilson/Penny Hopper

Name of Person

Dale S. Wilson, P.A.

Firm/Company

PO Box 1808

Address

Green Cove Springs, Florida 32043

City/State and Zip Code

luke.tonya@bellsouth.net

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

For further information concerning this matter, please call:

Dale S. Wilson/Penny P. Hopper

Name of Person

at ( 904 )

284-5618

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

**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:  
                                 First Coast Fusion Cheer and Dance, 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:

Due to a typographical error Article II Nature of Business states non-profit

competitive cheer squad. The corrected statement: for-profit competitive

cheer squad and any other lawful enterprise.

**OR**



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

Dated: April 13, 2011

Tonya R. Glisson

Signature of a member or authorized representative of a member

Tonya R. Glisson

Typed or printed name of signee

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

**ARTICLES OF ORGANIZATION**  
**OF**  
**FIRST COAST FUSION CHEER AND DANCE, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I**  
**NAME**

The name of the Limited Liability Company is FIRST COAST FUSION CHEER AND DANCE, LLC.

**ARTICLE II**  
**NATURE OF BUSINESS**

The general character, purpose, and nature of business to be transacted by this Company is: non-profit competitive cheer squad and any other lawful enterprise.

**ARTICLE III**  
**ADDRESS**

The mailing address and street address of the principal office of the company is:

Street address: 2070 Palmetto Street, Suites 14 and 15, Middleburg, Florida 32043

Mailing address: 2707 Salina Court, Green Cove Springs, Florida 32043.

**ARTICLE IV**  
**DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

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11 APR -6 AM 11:40  
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TALLAHASSEE, FLORIDA

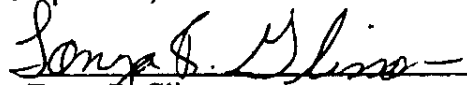
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DIVISION OF CORPORATIONS

**ARTICLE V**  
**REGISTERED OFFICE/AGENT**

The name and the Florida street address of the Registered Agent are:

Tonya R. Glisson  
5142 CR 209 South  
Green Cove Springs, Florida 32043

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 as provided for in Chapter 608, F.S.

  
Tonya R. Glisson

**ARTICLE VI**  
**MANAGING MEMBERS/DIRECTORS**

**Title:**

**Name and Address:**

MGRM/DIRECTOR

Theresa L. Funk  
2707 Salina Court  
Green Cove Springs, FL 32043

MGRM/DIRECTOR

Tonya R. Glisson  
5142 CR 209 South  
Green Cove Springs, FL 32043

MGRM/DIRECTOR

Amanda M. Austin  
3476 Shelley Drive  
Green Cove Springs, FL 32043

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
Tonya R. Glisson, MGRM/DIRECTOR

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TALLAHASSEE, FLORIDA

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