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J. SAULSBERRY **EXAMINER** MAY 1 0 2011

## **COVER LETTER**

Division of	n Section Corporations						
SUBJECT:	STEV	VART &	PADIL	LA LLC			
	Name	of Limited L	iability Co	mpany			
Dear Sir or Madam:							
The enclosed Article	es of Correction and fee(s)	are submitted	for filing				
Please return all cor	respondence concerning thi	s matter to th	e followin	g:			
	MARIO PADILLA						
	Name of Person			_			
S	TEWART & PADILLA	LLC			<b>∄</b> ′0	20	
	Firm/Company			<del>-</del>	LCG	=	
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	City/State and Zip Code					25	
mpadilla E-mail address	a@spotbusterprofess :: (to be used for future ann	sionals.com ual report not	n ification)	_			
For further informat	ion concerning this matter,	please call:					
N	/ario Padilla	at (	954	600-5178			
	une of Person			ode & Daytime Telephone Numb	er		
STREET/COURIE Registration Section Division of Corporar Clifton Building 2661 Executive Cent Tallahassee, Florida	tions ter Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check	for the following amount	<b>.</b>					
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Fili Certifie	ng Fee & d 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: STEWART & PADILLA LLC The articles of organization or the application to transact business SECOND: (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: Name of MGRM is MARIO R. PADILLA not MARIO P. PADILLA <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Signature of a member or authorized representative of a member

Mario R. Padilla

Typed or printed name of signee

Filing Fee:

\$25.00

**Certified Copy:** 

\$30.00 (optional)