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SECRETARY OF STATE
ANASSES FLORIDA

J. BRYAN

MAY 1 0 2011

**EXAMINER** 

## **COVER LETTER**

	egistration Section ivision of Corporations	
SUBJECT	:DALI	EHYDE, LLC
		ited Liability Company
Dear Sir o	Madam:	
The enclos	ed Articles of Correction and fee(s) are sub-	omitted for filing.
Please retu	rn all correspondence concerning this matte	er to the following:
	Bill R. Hutto	三二二 三三二 三三二 三三二二 三三二二二二二二二二二二二二二二二二二二二
	Name of Person	LARE A
	Hutto and Bodiford	TALLAHASSEE, FLORID
	Firm/Company	Engraph 3
	Post Office Box 2528	STATE STATE OF THE
	Address	Em .
	Panama City, FL 32402	
	City/State and Zip Code	
E-ma	mcguireb55@comcast.net il address: (to be used for future annual repo	ort notification)
For further	information concerning this matter, please of	call:
	Bill R. Hutto	at ( <u>850</u> ) <u>763-0723</u>
	Name of Person	Area Code & Daytime Telephone Number
Registratio Division of Clifton Bu 2661 Exect	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed i	s a check for the following amount:	
□ \$25 Fili		55 Filing Fee & \$60 Filing Fee, ertified Copy 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.

FIRST	The name of the limited liability company is:  DALEHYDE, LLC				
<u>SECO</u>	ND: The articles of organization or the application to transact business				
<u>(CH</u>	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT				
<b>√</b>	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  The incorrect statement is the name of the LLC (DALEHYDE, LLC). The				
	correct name of the LLC is ALDADALE, LLC. The wrong original name was				
	inadvertently given due to a failure to check prior to submittal.				
	PSE T				
	OR PER S				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
Dated:	May 6 2011				
	Signature of a member of authorized representative of a member				
	Bill R. Hutto				
	Typed or printed name of signee				
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				

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

L11000047401 FILED 8:00 AM April 21, 2011 Sec. Of State jbryan

#### Article I

The name of the Limited Liability Company is: DALEHYDE, LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is:
622 MALLORY DRIVE
PANAMA CITY, FL. US 32405

The mailing address of the Limited Liability Company is:

622 MALLORY DRIVE PANAMA CITY, FL. US 32405

#### **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:

DALE HYDE 622 MALLORY DRIVE PANAMA CITY, FL. 32405

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: DALE HYDE

#### Article V

The name and address of managing members/managers are:

Title: MGRM BRENDA MCGUIRE 622 MALLORY DRIVE PANAMA CITY, FL. 32405 US

Title: MGRM DALE HYDE 622 MALLORY DRIVE PANAMA CITY, FL. 32405 US

#### Article VI

The effective date for this Limited Liability Company shall be:

04/21/2011

Signature of member or an authorized representative of a member

Electronic Signature: BRENDA MCGUIRE

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.

L11000047401 FILED 8:00 AM April 21, 2011 Sec. Of State jbryan

