

# L1000073311

Florida Department of State  
Division of Corporations  
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## L. SELLERS

To: Division of Corporations  
Fax Number : (850)617-6383

JUN 29 2011

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

## EXAMINER

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GANELES AND NORKIN, PLLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Ganeles and Norkin, PLLC  
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:

M'Linda Draughn  
Name of Person

Saul Ewing, LLP  
Firm/Company

500 E. Pratt Street  
Address

Baltimore, Maryland 21202  
City/State and Zip Code

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

For further information concerning this matter, please call:

M'Linda Draughn at ( 410 ) 332-8859  
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

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 SECRETARY OF STATE  
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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:  
Ganeles and Norkin, PLLC

**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:  
The principal office, mailing address and resident agent address currently listed

as 3020 North Military Trail, Suite 200, Boca Raton, FL 33431 is incorrect.

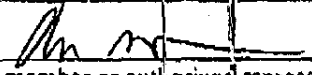
The correct address for the principal office, mailing address & resident agent is:

2365 NW 46th Street, Boca Raton, Florida 33431.

**OR**

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

Dated: June 28 2011

  
Signature of a member or authorized representative of a member

Philip M. Bogart, Authorized Representative

Typed or printed name of signee

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