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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ALLEY STUDIOS L.L.C.  Name of Limited Liability Company	
The state of the s	
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:	1225
Maurice Shipman  Name of Person	
Name of Person	Ç
Firm/Company	,
Tallahussee, FL 32311 City/State and Zlp Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Maurice Shipman at (561) 284-2437  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 \$\ \times \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
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 Flor	ida.	
<u>FIRST</u>	The name of the limited liability company is: Alley Studios 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 following	
	Company: "ALLEY STUDIOS LLC" contains the	
	wrong title name. The new name to be:	
ļ	Company: "ALLEY STUDIOS LLC" contains the wrong title name. The new name to be: registered and active is "Limited Union Colk	ckbles Lu
	<u>OR</u>	
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	
Dated:	August 8th 2011.	
	Signature of a member or authorized representative of a member	
	Maurice Shipman	
	Typed or printed name of signee	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	