

L11000093095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900211089089

09/06/11--01031--025 **25.00

FILED
2011 SEP -6 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

SEP 07 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Legacy Construction Advisors, 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:

Fred W. Mundie, Jr.

Name of Person

Fred W. Mundie, Jr., P.A.

Firm/Company

993 N Collier Blvd

Address

Marco Island FL 34145

City/State and Zip Code

fred@fmundie.com

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

For further information concerning this matter, please call:

Fred W. Mundie Jr

Name of Person

at (239)

394-3072
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

CR2E062 (08/05)

FILED
2011 SEP -6 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:
 Legacy Construction Advisors, 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:

The name of an individual who is not a managing member was incorrectly

placed into the original filing as if he was a managing member.

The sole managing member is: Dennis G. Morrisette, 1298 Orange Ct., Marco

Island, FL 34145.

OR



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

2011 SEP -6 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dated: _____

Sept 1

2011

Signature of a member or authorized representative of a member

Fred W. Mundie, Jr.

Typed or printed name of signee

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