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COVERI	LETTER ,
TO: Registration Section Division of Corporations	
	$L_{\underline{T}}$ LLC
Name of Limited L	Liability Company
Dear Sir or Madam:	
The enclosed Articles of Correction and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to the	the following:
LiANG Zhou Name of Person	
Name of Person	
Firm/Company	
2510 STATE Road 60	CAST = 3
Address	CAST FIRM 2
VALUED FL 33594	
Alrico FL 33594 City/State and Zip Code	
<u>Wujun 62.70 fmail, Com</u> E-mail address: (tobe used for future annual report no	NUJUN627 Ogmil. Com
For further information concerning this matter, please call:	
	204) 720 9272
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
	iling Fee & S60 Filing Fee, ied Copy Certificate of Status & Certified Copy

CR2E062 (08/05)

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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 <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:	W1000123163
	CLARK OLT, 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: Should be CLARK OIL, LLC NOT CLARKOLT, LLC Principal Adduss, MAILING Adduss, Registered Abert Adduss + member Adduss should be Road and NOT Rode. Title should be MGRM NOT NORM. Zhou is The last NAME And NOT The First NAME. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: Dated: 02/nov/20(1 Signature of a member or authorized representative of a member IANG ZHOU Typed or printed name of signee \$25.00 Filing Fee: **Certified Copy:** \$30.00 (optional)

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