

L12000088621

(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:

bb9116  
Steven Dunkle Auth. correction  
of document. (S)

Office Use Only



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2016 DEC 27 P 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEC 29 2016

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Deland Auto Spa Services LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Steven Dunkle**

Name of Person

**Deland Auto Spa Services LLC**

Firm/Company

**226 N Nova Rd STE 151**

Address

**Ormond Beach, FL. 32174**

City/State and Zip Code

**steve@sportyscarwash.com**

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

For further information concerning this matter, please call:

**Steven Dunkle**

Name of Person

**954**

Area Code

**818-6563**

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

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: Deland Auto Spa Servies LLC

**SECOND:** The Florida Document number of the limited liability company is: L12000088621

**THIRD:** Document to be corrected is: Remove PMCT as Mgr and add Steven Dunkle Articles of organization

**(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:

Remove PMCT as mgr. to Add Steven Dunkle as mgr/mbr.

**OR**

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

PMCT LLC was not suppose to be a manager on this corporation. Steven Dunkle was the intended manager

Please update records to reflect the removal of PMCT from corporate documents and add Steven Dunkle as manager/member

**OR**

☐ The electronic transmission of the record was defective.

/Steven Dunkle |

Signature of Authorized Representative

12/20/2014  
Date

Signature of new registered agent, if applicable : ( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**New Registered Agent's Signature, if changing Registered Agent:**

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*



Registered Agent's Signature

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

SECRETARY OF STATE  
AHASSEE, FLORIDA

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